## P08000098967

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
PłCK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer	
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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: The Zenith	Network, Inc.	
DOCUMENT NUMBER: P08000098	3967	
The enclosed Articles of Amendment and fee a	are submitted for filing.	
Please return all correspondence concerning th	is matter to the following:	
	Sarah Scorsone of Contact Person)	
<b>(F</b> )	irm/ Company)	
13750 Wes	st Colonial Dr Ste 350-351 (Address)	
(City/ S	er Garden FL 34787 State and Zip Code)	
For further information concerning this matter	, please call:	
Sarah Scorsone (Name of Contact Person)	at ( <u>407</u> ) <u>405-103</u> (Area Code & Daytim	2 ne Telephone Number)
Enclosed is a check for the following amount i	made payable to the Florida De	epartment of State:
\$35 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Of Tallahassee, FL 32301	



April 2, 2009

THE ZENITH NETWORK INC. % SARAH 13750 WEST COLONIAL DR., SUITE 350-351 WINTER GARDEN, FL 34787

SUBJECT: THE ZENITH NETWORK INC.

Ref. Number: P08000098967

We have received your document for THE ZENITH NETWORK INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L09000027142.

The document is illegible and not acceptable for imaging.

Section 607.0120(4), 617.01201, or 608.4081, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain Regulatory Specialist II

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Letter Number: 509A00011196

#### Articles of Amendment to Articles of Incorporation of

# The Zenith Network, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P08000098967 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

#### A. If amending name, enter the new name of the corporation:

The Kaizen GRP, Inc.  The new name must be distinguishable and "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name association," or the abbreviation "P.A."	Inc.," or Co.," or the designation	n "Corp," "Inc," or
B. Enter new principal office address, if application (Principal office address MUST BE A STREET)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC.	E BOX)	APR 15 AM 9: 27 WE FARY OF STATE LAHASSEE, FLORIDA
D. If amending the registered agent and/or renew registered agent and/or the new regist		enter the name of the
New Registered Office Address:	(Florida street address)	
-	(City)	, Florida <i>(Zip Code)</i>

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

### If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Add ☐ Remove
			☐ Add☐ Remove
			Add Remove
	nding or adding additional Articles, additional sheets, if necessary). (Be		
provi	amendment provides for an exchangions for implementing the amendment for applicable, indicate N/A)		

The date of each amendment(s) adoption: March 19, 2009		
Effective date if applicable:	April 13, 2009	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	are approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated April	13, 2009	
Signature _	Jarah M. Jessen	
	a director, president of ther officer - if directors or officers have not been	
	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Sarah Scorsone	
	(Typed or printed name of person signing)	
	VP/Sec	
	(Title of person signing)	