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Amend

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JUL 26 2010

COVER LETTER

? TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SARASOTA MANAGEMENT ENTERPRISES INC.
DOCUMENT NUMBER: <u>POSOOO109204</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LYNDA HALL Name of Contact Person
SARASOTA MANAGE MENT ENTERPRISES INC.
10 South ADAMS
Address
SARASOTA FL 34236
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
LYNDA HALL at (941) 388-5500
/ Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
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 Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

		~47.43.5	14
POSO00109204 (Document Number	r of Corporation (if know	^ريَّرُ vn)	PE MAINTE
resuant to the provisions of section 607.1006, Finendment(s) to its Articles of Incorporation:	,		
If amending name, enter the new name of the	e corporation:		
N/A			The new
mme must be distinguishable and contain the obreviation "Corp.," "Inc.," or Co.," or the desime must contain the word "chartered," "profess	signation "Corp," "Inc.	" or "Co". A professional of	ed" or the corporation
Enter new principal office address, if application of the address MUST BE A STREET A		N/A	_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)	N/A	- - -
. If amending the registered agent and/or reginew registered agent and/or the new register	istered office address in	r Florida, enter the name of	 the
Name of New Registered Agent:	NA		
New Registered Office Address:	(Florida street a	ddress)	
		, Florida	
	(City)	(Zip Code)	
ew Registered Agent's Signature, if changing hereby accept the appointment as registered agen	Registered Agent: nt. I am familiar with a	nd accept the obligations of th	ne position.

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)

Title -	Name		<u>Address</u>		Type of Action
VP_	GORDON H	ALL	4456 STRE # KODS SARASOTA	nmsibe Court FL 3423	Add Remove
· 		···			Add Remove
		n gage a managa a ma		-	Add Remove
	ding or adding additional Aidditional Aidditional sheets, if necessary).				
provisi	mendment provides for an eons for implementing the another upplicable, indicate N/A)	xchange, recla acadment if a W/A	nssification, or c ot contained in	ancellation of is:	sued shares, itself:
					· · · · · · · · · · · · · · · · · · ·
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	The date of each amendment(s)	adoption: 7-/5-/0
		(date of adoption is required)
•	• Effective date if applicable:	no more than 90 days after amendment file date)
	Adoption of Amendment(s)	(CHECK ONE)
	The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	The amendment(s) was/were a must be separately provided f	approved by the shareholders through voting groups. The following statemen for each voting group entitled to vote separately on the amendment(s):
_	"The number of votes cas	st for the amendment(s) was/were sufficient for approval
	by))
by" (voting group)		oting group)
	The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder
	The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
	Dated	7-20-10. L'Hall.
	(By a selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
		LYNDA HALL (Typed or printed name of person signing)
		PRESIDENT (Title of person signing)