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DEP. TE ORPORATIONS
TALL AHASSEE FLORIDA

RECEIVED
09 MAY -4 PH 4: 38

SEUNE JARY OF STATE

5/4/09

COVER LETTER

NAME OF CORPORATION:

The Tallahassee Company

DOCUMENT NUMBER: POBODO | 09 6 0 9

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALOSHO Keels
(Name of Contact Person)

The Tallahassee Company
(Firm/Company)

208 W. Tellahassee
(Address)

Tallahassee Fl. 32 39/
(City/State and Zip Code)

For further information concerning this matter, please call:

ALASha Leels at (850) 322-46/4 (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee

\$43.75 Filing Fee & Certificate of Status

Standard Sta

\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

FILED

Articles of Incorporation

09 MAY -4 PM 4: 38

(Name of Corporation as currently filed with the Florida Dept. of State) (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 new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) (Zip Code)

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)

	tle BAON	Name TRADIS Kods	Address 208 W. Tarnos Tallohasses P. 3230	Type of Action Add Remove
•				Add Remove
				Add Remove
		g or adding additional Article ional sheets, if necessary). (A		
F.	provisions		nge, reclassification, or cancellation ment if not contained in the amend	
			•	

The	e date of each amendment(s) adoption: May 4, 200 9				
Effective date if applicable: May 4 2005 (no more than 00 days after amendment file date)					
	(no more than 60 days after amendment file date)				
Ado	option of Amendment(s) (CHECK ONE)				
	The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.				
	The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)				
	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.				
	The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.				
	Dated_ May 4, 2009				
	Signature alasha C. Lus				
	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)				
	ALASHA C KEELS				
	(Typed or printed name of person signing)				
	(FC)				
	(Title of person signing)				