P09000003336

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(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
FACTORIASSEE, FLORIDA

AMend. 09-11-09 Dc

COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: Hurricane Cut 5 Inc.		
DOCUMENT NUMBER: P09 00000 3336		
The enclosed Articles of Amendment and fee are submitted for filing.		
Ple se return all correspondence concerning this matter to the following:		
Melissa Vickery Name of Contact Person		
Hurricane Cut 5 Inc		
8100 Thomas Drive		
Panama City 71 32408 City/ State and Zip Code		
City/ State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Melissa Vickery at (251) 725 4939 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	atus	
Mailing Address Street Address		
Amendment Section Amendment Section Division of Corporations Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327 Clifton Building		
Tallahassee, FL 32314 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

Hurricane Cat 5 Inc.		
(Name of Corporation as currently filed with the Florida Dept. of State)		
Po900000 3336		
(Document Number of Corporation (if known)		
December of the continue of th	Al E-	11
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> add amendment(s) to its Articles of Incorporation:	pts the to	liowing
A. If amending name, enter the new name of the corporation:		
	The non	
name must be distinguishable and contain the word "corporation," "company," or "incorporate abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional contain the word "chartered," "professional association," or the abbreviation "P.A."		e
B. Enter new principal office address, if applicable:	_	
(Principal office address MUST BE A STREET ADDRESS)	6 –	
	6 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	
	품 없	77
C. Enter new mailing address, if applicable:		-
(Mailing address MAY BE A POST OFFICE BOX)	7 P	
<u>. – – – – – – – – – – – – – – – – – – –</u>	₹ 	
D. If amending the registered agent and/or registered office address in Florida, enter the name of new registered agent and/or the new registered office address;	<u>he</u>	,
Name of New Registered Agent: Meli>SA Vickory 8100 Thomas price		
8100 Thomas price		
New Registered Office Address: (Florida street address)		
Panama City Florida 3=	1408	
(City) (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	e position.	
Melissa & Vickery		
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
sipent	Meliss A Vickery	8100 Thomas Drin Panama City 71 32408	Add Remove
			Add Remove
+			Add Remove
<u>provisio</u>	nendment provides for an exchange, re	classification, or cancellation of iss (not contained in the amendment i	ued shares, tself:
(if no	ot applicable, indicate N/A)		

The date of each amendmen	The date of each amendment(s) adoption: 9-7-07		
· · ·	(date of adoption is required)		
Effective date <u>it applicable</u> .	(date of adoption is required) 9-(-09 (no more than 90 days after amendment file date)		
Adoption of Amendment(s)			
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.		
	ere approved by the shareholders through voting groups. The following statemented for each voting group entitled to vote separately on the amendment(s):		
	s cast for the amendment(s) was/were sufficient for approval		
by	(voting group)		
action was not required.	ere adopted by the board of directors without shareholder action and shareholder		
action was not required.	ere adopted by the incorporators without shareholder action and shareholder		
	1-1-09		
Signature _	y director, president or other officer – if directors or officers have not been		
201	y director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)		
·	John M. P. Hman Jr - VP (Typed or printed name of person signing)		
	(Title of person signing)		
	<i>U</i> =		