## Po900004319

| (Re                     | questor's Name)   | , -         |
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| <b>V</b>                | <b>,</b>          |             |
|                         |                   |             |
| (Cit                    | y/State/Zip/Phon  | e #)        |
| PICK-UP                 | ☐ WAIT            | MAIL.       |
|                         |                   |             |
| (Bu                     | siness Entity Nar | ne)         |
|                         |                   |             |
| (Do                     | cument Number)    |             |
|                         |                   |             |
| Certified Copies        | _ Certificates    | s of Status |
|                         |                   |             |
| <del> </del>            |                   |             |
| Special Instructions to | Filing Officer:   |             |
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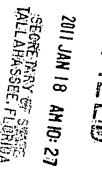


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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO                       | RATION:                                      | La Maison Publishing, I                                           | Inc.                                                                                    |
|-------------------------------------|----------------------------------------------|-------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| DOCUMENT NUMI                       | NUMBER: P0900004319                          |                                                                   |                                                                                         |
| The enclosed Articles               | of Amendment and fee a                       | are submitted for filing.                                         |                                                                                         |
| Please return all corre             | spondence concerning th                      | is matter to the following:                                       |                                                                                         |
|                                     |                                              | Janet Sierzant                                                    |                                                                                         |
|                                     | ,                                            | Name of Contact Person                                            |                                                                                         |
|                                     | La M                                         | aison Publishing, Inc.                                            |                                                                                         |
|                                     |                                              | Firm/ Company                                                     |                                                                                         |
|                                     | 1889                                         | Old Dixie Hwy. #208                                               |                                                                                         |
|                                     |                                              | Address                                                           |                                                                                         |
|                                     | Ve                                           | ero Beach Fl 32960                                                |                                                                                         |
|                                     | C                                            | City/ State and Zip Code                                          |                                                                                         |
|                                     | lamaison<br>E-mail address: (to be use       | npub@comcast.net ad for future annual report notification)        |                                                                                         |
| For further informatio              | n concerning this matter,                    | please call:                                                      |                                                                                         |
| Jan                                 | et Sierzant                                  | at ( 772 ) 5  Area Code & Daytime Te                              | 32-5972                                                                                 |
| Name of C                           | Contact Person                               | Area Code & Daytime Te                                            | lephone Number                                                                          |
| Enclosed is a check fo              | r the following amount n                     | nade payable to the Florida Depar                                 | tment of State:                                                                         |
| □ \$35 Filing Fee                   | ☑ \$43.75 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 Addre<br>Amendment Se       |                                              | Street Address Amendment Section                                  |                                                                                         |
| Division of Co                      |                                              | Division of Corporations                                          |                                                                                         |
| P.O. Box 6327 Tallahassee, FL 32314 |                                              | Clifton Building                                                  |                                                                                         |
|                                     |                                              | 2661 Executive Center Circ                                        | le                                                                                      |
|                                     |                                              | Tallahassee, FL 32301                                             |                                                                                         |

## **Articles of Amendment** to

| Articles of Incorporation of                                             | TASECON 18 CO          |
|--------------------------------------------------------------------------|------------------------|
| (Name of Corporation as currently filed with the Florida Dept. of State) | - AFTA 199 - 44 10. 23 |
| La Masion Publishing, Inc.                                               |                        |
| (Document Number of Corporation (if known)                               | TOA                    |

| (Name of Corporation as Currently filed with t                                                                                                                                            |                                                                                                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| La Masion Publishing                                                                                                                                                                      | ion (if known)                                                                                 |
| (Document Number of Corporati                                                                                                                                                             | ion (if known)                                                                                 |
| Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:                                                                             | es, this Florida Profit Corporation adopts the follo                                           |
| A. If amending name, enter the new name of the corporation                                                                                                                                | <u>n:</u>                                                                                      |
| La Maison Publishing,                                                                                                                                                                     | Inc. The new                                                                                   |
| name must be distinguishable and contain the word "corp<br>abbreviation "Corp.," "Inc.," or Co.," or the designation "Co<br>name must contain the word "chartered," "professional associa | oration," "company," or "incorporated" or the orp," "Inc," or "Co". A professional corporation |
| B. Enter new principal office address, if applicable:                                                                                                                                     | 1889 Old Dixie Hwy                                                                             |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )                                                                                                                               | 208                                                                                            |
|                                                                                                                                                                                           | Vero Beach, Fl 32960                                                                           |
| 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 new registered agent and/or the new registered office add                                                                    |                                                                                                |
| Name of New Registered Agent: Janet Sierzar                                                                                                                                               | nt                                                                                             |
| 1889 Old Dixi                                                                                                                                                                             | ie Hwy 208                                                                                     |
| New Registered Office Address: (Florid                                                                                                                                                    | da street address)                                                                             |
| Vero Beach                                                                                                                                                                                | , Florida 32960<br>(Zip Code)                                                                  |
| (City)                                                                                                                                                                                    | (Zip Code)                                                                                     |
| New Registered Agent's Signature, if changing Registered Agent is the suppointment as registered agent. I am family signature of New Signature of New                                     |                                                                                                |

## 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           |
|-------------------------|----------------------------------------------------------------------------|------------------------------------|--------------------------|
|                         |                                                                            |                                    |                          |
|                         |                                                                            |                                    | F 1 5                    |
| <del></del>             |                                                                            |                                    | <b>—</b> –               |
| E. If amen<br>(attach a | iding or adding additional Articles, additional sheets, if necessary). (Be | enter change(s) here:<br>specific) |                          |
|                         |                                                                            |                                    |                          |
| F. <u>If an ar</u>      | mendment provides for an exchange                                          | e, reclassification, or cancell    | lation of issued shares, |
| (if r                   | not applicable, indicate N/A)                                              | at it not contained in the an      | nenument usen;           |
|                         |                                                                            |                                    |                          |
|                         |                                                                            |                                    |                          |

| The date of each amendment(s) adoption:                                              | 1.12/11                                                                                                               |
|--------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|
| Effective date if applicable:                                                        | (date of adoption is required)                                                                                        |
| (no more than !                                                                      | 90 days after amendment file date)                                                                                    |
| Adoption of Amendment(s) (CE                                                         | IECK ONE)                                                                                                             |
| The amendment(s) was/were adopted by the by the shareholders was/were sufficient for | e shareholders. The number of votes cast for the amendment(s) approval.                                               |
|                                                                                      | ne shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s): |
| "The number of votes cast for the amen                                               | dment(s) was/were sufficient for approval                                                                             |
| by                                                                                   |                                                                                                                       |
| (voting group)                                                                       |                                                                                                                       |
| The amendment(s) was/were adopted by the action was not required.                    | board of directors without shareholder action and shareholder                                                         |
| The amendment(s) was/were adopted by the action was not required.                    | incorporators without shareholder action and shareholder                                                              |
| Dated 1 1 2 1 1                                                                      |                                                                                                                       |
| Signature (By a director, president)                                                 | lent or other officer – if directors or officers have not been                                                        |
| selected, by an incor<br>appointed fiduciary l                                       | porator of in the hands of a receiver, trustee, or other court by that fiduciary)                                     |
| Jane                                                                                 | et Sietzant ped or printed name of person signing)                                                                    |
|                                                                                      |                                                                                                                       |
|                                                                                      | f person signing)                                                                                                     |
| (Title o                                                                             | r herson signing)                                                                                                     |