## P0900006512

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
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JUL 2 3 2012 C. MUSTAIN

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Sunshine	State Broward, Inc
DOCUMENT NUMBER: P090000	006512
The enclosed Articles of Amendment and fee are sub	omitted for filing.
Please return all correspondence concerning this matt	ter to the following:
Sunch	Name of Contact Person
Surism	ine State Broward Firm/Company
888 E. Las	Olas Blyd, Suite 400
Fort Land	ordale, fl 35301 City/ State and Zip Code
Kim@merlewoo E-mail address: (to be use	od. Com ed for future annual report notification)
For further information concerning this matter, please	e call:
Kim Sawyer Name of Contact Person	at ( 954 ) 535 - 511 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	
\$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 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 Circle

Tallahassee, FL 32301



July 10, 2012

KIM SAWYER 888 E. LAS OLAS BLVD., STE 400 FT. LAUDERDALE, FL 33301

SUBJECT: SUNSHINE STATE BROWARD, INC

Ref. Number: P0900006512

We have received your document for SUNSHINE STATE BROWARD, 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 date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a <u>NOT FOR PROFIT</u> corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

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) 245-6050.

Carol Mustain Regulatory Specialist II

Letter Number: 612A00018469

## **Articles of Amendment**

		to.
Articles	of	Incorporation

of
Donshine State Dowlard, Inc
(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(
its Articles of Incorporation:
as Articles of Incorporation.
A. If amending name, enter the new name of the corporation:
Same The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" of 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."
and the same of th
B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)  888 E Las Das Blyd 4th FL
fort lauderdale FL33301
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  888 E Las Dlas Blvd 4th FL
Fort lauderdale, FL 33301
The state of the s
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 Kim SAWUFC
888 E. Las Dlas Blvd. 44h FC
(Florida street address)
(
New Registered Office Address: Fort audordale, Florida 33301
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agant. I am familiar with and accept the obligations of the position.
101121101
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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is

a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change,

Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change Add Remove	(fres) P	Brad Wood	888 E las Dlas Blud HH Floor Et landerdali, FC3330,
2) Change Add Remove	(fles) P	Kim Sawyer	888 F. Las Olas Blud 416 FC Pt loudendale, FC33301
3 ) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove	<del></del>		

If amending or adding additional Artic (attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
V / L	
1 1 10	
	·
. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate $N/A$ )	ndment if not contained in the amendment itself:
N/A	
<del></del>	· · · · · · · · · · · · · · · · · · ·
<del>.</del>	

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The date of each amendment(s) ad	option:
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement 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)
action was not required.  The amendment(s) was/were ado	pted by the board of directors without shareholder action and shareholder  pted by the incorporators without shareholder action and shareholder
action was not required.  Dated Luly	18,2012 Em Sawyls
selected	frector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	Resident
	(Title of person signing)