P0900009966

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Chrylan Charles

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION:	1st Alliance Payroll, Inc	<u>. </u>
DOCUMENT NUM	ИВЕR:	P09000009966	
The enclosed Article	es of Amendment and fee a	re submitted for filing.	
Please return all cor	respondence concerning thi	is matter to the following:	
_		FRED RICE	
	Ŋ	Iame of Contact Person	
1		LIANCE PAYROLL, INC	
		Firm/ Company	
F		PO BOX 783696	
		Address	
_		R GARDEN / FL / 34778	
	C	lity/ State and Zip Code	
	FREDRI E-mail address: (to be use	CEJR@LIVE.COM If for future annual report notification)	
For further informat	ion concerning this matter,	please call:	
	FRED RICE	at (407) 5	09 2354
Name o	of Contact Person	Area Code & Daytime Tel	ephone Number
Enclosed is a check	for the following amount n	nade payable to the Florida Depart	tment of State:
	□ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ad- Amendment Division of 0 P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl	e

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

1ST ALLIANCE PAYROLL, INC (Name of Corporation as currently filed with the Florida Dept. of State)

P090	00009966		
(Document Numb	ber of Corporation (if kno	wn)	
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	, Florida Statutes, this F	lorida Profit Corporation adopt	s the follo
A. If amending name, enter the new name of	the corporation:		
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the aname must contain the word "chartered," "professional"	designation "Corp," "Inc	"company," or "incorporated c," or "Co". A professional con	
B. Enter new principal office address, if application (Principal office address MUST BE A STREET)			
 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC) D. If amending the registered agent and/or renew registered agent and/or the new registered. 	egistered office address i	n Florida, enter the name of the	FILED FILED
Name of New Registered Agent:			
New Registered Office Address:	(Florida street d	address)	
-	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changin I hereby accept the appointment as registered ag		and accept the obligations of the	position.
C	Constant of New Pagistans	d Agent if changing	

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
<u>VP</u>	DARNLEY, WILLIAM	4700 MILLENIA BLVD ORLANDO, FL 32839	□ Add ☑ Remove
			
	ding or adding additional Articles, en additional sheets, if necessary). (Be sp		
provisi	mendment provides for an exchange, ons for implementing the amendmen not applicable, indicate N/A)		
	<u> </u>		

The date of each amendment(s) adoption:				
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were ad by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.			
	proved 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	.,,			
(vot	ing group)			
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder			
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder			
Dated_06/01/20	009			
Signature				
(By a di	ector, president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)			
	FREDERICK RICE, JR			
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			