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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	LaBella Services, Inc.	
DOCUMENT NU	JMBER:	P0900010132	
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning th	s matter to the following:	
		Peter C. Fedor III	
	7	ame of Contact Person	
	La	Bella Services, Inc.	
•		Firm/ Company	
Ì	5500	Military Trail, #22-336	
		Address	
,		upiter, FL 33458	
	C	ty/ State and Zip Code	
	Pcfedo E-mail address: (to be use	r@comcast.net I for future annual report notification)	
For further inform	ation concerning this matter,	please call:	
	eter C. Fedor III	at (561) 744-2271 Area Code & Daytime Telephone Number	
	of Contact Person k for the following amount n	ade payable to the Florida Department of State:	
☑ \$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy	atus
P.O. Box 6	nt Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	·
		Tallahassee, FL 32301	

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	LaBella Services, Inc	•
DOCUMENT N	UMBER:	P09000010132	
The enclosed Artic	cles of Amendment and fee	are submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
		Peter C. Fedor III	
	ſ	Name of Contact Person	
	La	Bella Services, Inc.	
	,	Firm/ Company	
5500 Military Trail, #22-336			
		Address	
		Jupiter, FL 33458	
	C	City/ State and Zip Code	
	pcfed E-mail address: (to be use	or@comcast.net d for future annual report notification)	
For further information	ation concerning this matter,	please call:	
P	eter C. Fedor III	at (561) 74	14-2271
Name	of Contact Person	at (561) 74 Area Code & Daytime Tele	ephone Number
Enclosed is a check	k for the following amount n	nade payable to the Florida Depart	ment of State:
☑ \$ 35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	t Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	•

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

LaBella Services,Inc.	10	AUS 24	酬	3:09
(Name of Corporation as currently filed with the Florida Dept. of State) SE	- CRETARY	08	STATE
P0900010132	TALI	AHASS	EE.F	LORIDA
(Document Number of Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Co</i> amendment(s) to its Articles of Incorporation:	rporat	ion adopts	the	following
A. If amending name, enter the new name of the corporation;				
		7	he n	ew
name must be distinguishable and contain the word "corporation," "company," or abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A name must contain the word "chartered," "professional association," or the abbreviation	profes	sional corp	or oorat	the ion
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 new registered agent and/or the new registered office address:	the na	me of the		
Name of New Registered Agent:				
New Registered Office Address: (Florida street address)				
(City) (Zip C	Florid	a		
(City) (Zip C	oae)			
New Registered Agent's Signature, if changing Registered Agent:		6.3	• . •	
I hereby accept the appointment as registered agent. I am familiar with and accept the ob-	ligatio	ns of the po	sttio	n.

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)

Title <u>Address</u> **Type of Action** <u>Name</u> D Syd K. Hobbs Jupiter, FL 33458

Remove ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendmen	t(s) adoption: August 24, 2010
Effective date <u>if applicable</u> :	August 24, 2010 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder action are shareholder action and shareholder action and shareholder
Dated Aug	ust 24, 2010
Signature	ff for
sele	a director, president other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court cointed fiduciary by that fiduciary)
	Peter C. Fedor III
	(Typed or printed name of person signing)
	President
	(Title of person signing)