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Amend

DIVISION OF CORFORMING

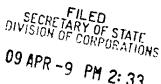
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Col	ors R Us, Inc.	8
DOCUMENT NUMBER: P0900	00012363	
The enclosed Articles of Amendment	and fee are submitted for filing.	
Please return all correspondence conce	erning this matter to the following:	
	Samuel Langfitt	
	(Name of Contact Person)	
****	Colors R Us, Inc.	
	(Firm/ Company)	
	61 Country Club Rd.	
	(Address)	
	Cocoa Beach, FL 32931 (City/ State and Zip Code)	
For further information concerning this	• •	
Samuel Langfitt	at (<u>321</u>) 749-4138	
(Name of Contact Person)	(Area Code & Daytime Telephone Nu	
Enclosed is a check for the following a	amount made payable to the Florida Department of S	itate:
▼\$35 Filing Fee	atus Certified Copy Certified Copy is Certified	Filing Fec cate of Status ed Copy ional Copy closed)
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

Articles of Amendment to Articles of Incorporation of



		. 11 21 3
	ors R Us, Inc. intly filed with the Florida Dept. of S	
		tate)
	00012363 ber of Corporation (if known)	
ursuant to the provisions of section 607.1006 ollowing amendment(s) to its Articles of Incorp		it Corporation adopt
. If amending name, enter the new name of	the corporation:	
he new name must be distinguishable an incorporated" or the abbreviation "Corp.," Co". A professional corporation name ssociation," or the abbreviation "P.A."	"Inc.," or Co.," or the designation	"Corp," "Inc," or
Enter new principal office address, if applerincipal office address <u>MUST BE A STREET</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u></u>	
If amending the registered agent and/or renew registered agent and/or the new regist		nter the name of the
		nter the name of the
new registered agent and/or the new regist		nter the name of the
Name of New Registered Agent:	tered office address:	nter the name of the

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 Type of Action** Name <u>Address</u> William M. Knox 1781 Mason Terrace __ 🖸 Add Melbourne, FL 32935 Remove _____ 🚨 Add _____ Remove _____ 🚨 Add 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 amendment	(s) adoption: April 3, 2009
Effec	rtive date <u>if applicable</u> :	•
		(no more than 90 days after amendment file date)
Ado _l	ption of Amendment(s)	(<u>CHECK ONE</u>)
T b	the amendment(s) was/we y the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
		re approved by the shareholders through voting groups. <i>The following statemend for each voting group entitled to vote separately on the amendment(s):</i>
	"The number of votes	east for the amendment(s) was/were sufficient for approval
	by	(voting group)
		(voting group)
	he amendment(s) was/wer ction was not required.	re adopted by the board of directors without shareholder action and shareholder
	he amendment(s) was/wer ction was not required.	e adopted by the incorporators without shareholder action and shareholder
	Dated April 6	3, 2009
	Signature	
	sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
		Stuart E. Langfitt
		(Typed or printed name of person signing)
		President
		(Title of person signing)