(Re	equestor's Name)	
(Ad	ldress)	
. (Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
·		

Office Use Only



800155824658

05/13/09--01017--011 \*\*35.00

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: NEIL	O'NEAL JR. INC.
DOCUMENT NUMBER: P0900	0031632
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
NEIL H. O'NE (Name of C	Contact Person)
481 AVOCADO (Firm/	AUE Company)
(Ac	ldress)
WEST PAM BEG (City/ State	and Zip Code)
For further information concerning this matter, ple	rase call:
NEIL O'NEAL JR (Name of Contact Person)	at ( 56 ) 656-4945  (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount mad	
\$35 Filing Fee & Certificate of Status	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	Street Address Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

2009 HAV.
TALLAHASSEE, FLORIDA
- CORIDA

the

. Article	s of Amendment	2009 HAL
Articles	to of Incorporation	TSECON 13 PM
·	of	TALLAHASET OF
NeIL O'NEA	L JR. IM.	TALLAHASSEE, FLORIDA
(Name of Corporation as currently	y filed with the Florid	la Dept, of State)
P09 0000 316	32	
(Document Number	of Corporation (if kno	own)
Pursuant to the provisions of section 607.1006, F following amendment(s) to its Articles of Incorpora		Florida Profit Corporation adopts
A. If amending name, enter the new name of the	corporation;	
CINEAL JR. RO	OFING IN	$C_{i}$
The new name must be distinguishable and "incorporated" or the abbreviation "Corp.," "In "Co". A professional corporation name massociation," or the abbreviation "P.A."	contain the word "c.," or the	'corporation," "company," or designation "Corp," "Inc," or
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	
D. If amending the registered agent and/or registered agent and/or the new registered		n Florida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street d	address)
	(City)	, Florida (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

. The date of each amendment(s	4/29/09
•	, adoption:
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 by the shareholders was/wer	-adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	-adopted by the incorporators without shareholder action and shareholder
Dated	4/20/09
(Ву а	director, president or other officer – if directors or officers have not been
	ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Nelloneal JR
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)