## 709000032754

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02/09/12-01012-012

Amend

12 FEB -9 M 2: 02
SECRETARY OF STATE

FEB 0 9 2012 T. ROBERTS

## **COVER LETTER**

Division of Corporations VHBLISHING GROW PARADISE 0000 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) 941-306-2166 (Howe) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$43.75** Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

## **Mailing Address**

TO: Amendment Section

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

PARADISE PUBLISHING 6	FROOP INC. WEGEN
(Name of Corporation as currently filed with the F	
Po9000032754	35000
(Document Number of Corporation (i	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	•
not applicable	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation ".	n," "company," or "incorporated" or the abbreviation  Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	5020 CLACK 60AD
(Principal office address MUST BE A STREET ADDRESS)	Suite 505
•	SACASOTA THOUGH 34233
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5000 CLARK LOAD
	Suite 505
•	SARASOTA, FLOZIDA 34233
D. If amending the registered agent and/or registered office addr- new registered agent and/or the new registered office address:	
Name of New Registered Agent LOCI AN	
	YNTRY FORE CT.
(Florida stre	
New Registered Office Address: OVIEDO (City)	, Florida <u>32766</u> (Zip Code)
icity	(Lip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar w	ith and accent the obligations of the position
Thereby accept the appointment as registered agent. I am jumitar w	1 h . O O
Signature of New Registered A	gent if changing
Signature of them Registered A	Born, ij crianging

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: X Change	<u>PT Johr</u>	1 Doe		
X Remove	<u>V</u> <u>Mik</u>	e Jones	,	
_X Add	SV Sali	y Smith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) Change Add Remove	<u>D</u>	ROBERT MA	· · · · · · · · · · · · · · · · · · ·	NEC DCIVE
2) Change  Add  Remove	D	LOCI A. M	BEADENTON FOR  342000 LOUNTRY COUNTRY COUNTRY CO	
3)ChangeAddRemove		·		4 32766 - -
4) Change Add Remove			·	• •
5) Change Add Remove	4	·		• •
6) Change Add Remove	•			,

NONE
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)
NA

•	•
The date of each amendment(s) ac	loption: $0-\sqrt{-/2}$
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 20 days after untertainent file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
☐ The amendment(s) was/were app must be separately provided for	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 i	for the amendment(s) was/were sufficient for approval
by	
	(voting group)
action was not required.  The amendment(s) was/were adop	oted by the board of directors without shareholder action and shareholder oted by the incorporators without shareholder action and shareholder
action was not required.  Dated	14/2012
Signature	Tobert 18/setun
(By a dir	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 court diductary by that fiductary)
_	(Typed or passed name of person signing)
	(Typed or rested name of person signing)
· _	DITECTOR
· ·	(Title of person signing)