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SECRETARY OF STATE
SECRETARY OF STATE

C.COULLIETTE

MAY 2 7 2009

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations • TULLOW PROPORTIES INC NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company For further information concerning this matter, please call: Name of Contact Person at (727) R44-5000

Area Code & Daytime Telephone Number 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 Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Street Address Mailing Address** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

Articles of Amendment to

Art Art	icles of Incorporation		
	of		
	FRTIES LNC	·	
(Name of Corporation as currentl	y filed with the Florida D	ept. of State)	
			
(Document Number	r of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Famendment(s) to its Articles of Incorporation:	Florida Statutes, this <i>Florid</i>	da Profit Corporation ac	lopts the following
A. If amending name, enter the new name of th	e corporation:		
			The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the desname must contain the word "chartered," "profess	signation "Corp," "Inc," c	or "Co". A professional	
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	<i>BOX</i>)	ALLAHASSE	O9 HAY 21
D. If amending the registered agent and/or reginew registered agent and/or the new register		lorida, enter the name of	The the
Name of New Registered Agent:			
New Registered Office Address:	(Florida street addr	ress)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing l			tha manitias
I hereby accept the appointment as registered ager	nt. I am familiar with and i	accept the obligations of t	ne position.
Cian	ature of New Registered Ac	ant 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>Tit</u>	<u>le</u>	<u>Name</u>	•	Address	Type of Action
Pres <u>.</u> T	<u>Ren</u> z	SEAN CA	RROLL	8206 PAPAYA St. PORT RICKLY FL. 34668	□ Add ½ Remove
رد2	Treas	SHAWN 6	ARROLL	PORT RICHEY FL. 34668	Add □ Remove
					☐ Add ☐ Remove
E.	<u>If amending</u>	g or adding additi	onal Articles, enter cl	hange(s) here:	
	attach addit	ional sheets, if nec	essary). (Be specific)	
F.	provisions	dment provides for implementing applicable, indicate	the amendment if no	ssification, or cancellation of iss of contained in the amendment i	ued shares, tself:
					

The date of each amendment(s) adoption:		
Effective date if applicable:		
(no n	nore4han 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were sur	opted by the shareholders. The number of votes cast for the amendment(s) fficient 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	or the amendment(s) was/were sufficient for approval	
by	,,,	
(voti	ng group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated5-	18-09	
Signature(By a directed,	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 if fiduciary by that fiduciary)	
шүрү	,	
	TAMES K CARROLL (Typed or printed name of person signing)	
	Title of person signing)	