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| (Re | equestor's Name) | |
|-------------------------|----------------------|----------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone # | r) |
| PICK-UP | WAIT | MAIL |
| (Bu | isiness Entity Name |) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates o | f Status |
| Special Instructions to | Filing Officer: | |
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| | Office Use Only | |



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TO: A'mendment Section Division of Corporations '

Tallahassee, FL 32314

| NAME OF CORPORATION: | ELR | RESTORATION | INC. |
|--|-------------------------|---|---|
| NAME OF CORPORATION: DOCUMENT NUMBER: | P09 | 0000 485 | 78 |
| The enclosed Articles of Amendme | nt and fee are sub | omitted for filing. | |
| Please return all correspondence co | ncerning this mat | ter to the following: | |
| | R(C Name o | Contact Person | |
| E | LR. Re | SYONATON, | TNC |
| | 1237 | Portillo Da Address | • |
| <u> </u> | DE /40 City/ Sta | wa FC 33 Ite and Zip Code | 725 |
| E-mail addre | ess: (to be used for fi | uture annual report notification) | |
| For further information concerning CANOS VAIGUA Name of Contact Person | | e call: at (<u>321</u>) <u>206 – a</u> Area Code & Daytime Tel | 8372 ephone Number |
| Enclosed is a check for the followin | g amount made p | ayable to the Florida Depart | tment of State: |
| \$35 Filing Fee \$43.75 Filing Certificate o | | \$43.75 Filing Fee & 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 | 1 | Street Address Amendment Section Division of Corporations Clifton Building | |

2661 Executive Center Circle

Tallahassee, FL 32301

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Articles of Incorporation

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| (Name of Corporation as currently filed with t | he Florida Dept. of State) | |
|--|---|--------------------|
| P0 90000 | 048578 | |
| (Document Number of Corporation | | |
| Pursuant to the provisions of section 607.1006, Florida Statute amendment(s) to its Articles of Incorporation: | es, this Florida Profit Corporation add | opts the following |
| A. If amending name, enter the new name of the corporation | <u>ı:</u> | |
| | XI/A | The new |
| name must be distinguishable and contain the word "corporable by abbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associated." | orp," "Inc," or "Co". A professional o | ed" or the |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | 1237 PORTILO DECYONA, FL | _DRIVE |
| C. Enter new mailing address, if applicable: | 32725 | _ |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | | _ _ _ |
| D. If amending the registered agent and/or registered office: | address in Florida, enter the name of | the |
| new registered agent and/or the new registered office add | | |
| Name of New Registered Agent: | | MELLIAN 09 SEP |
| New Registered Office Address: (Florid | da street address) | 29 |
| | Florido | |
| (City) | , Florida (Zip Code) | 7.2 |
| New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famil Signature of New II | gent: liar with and accept the obligations of the Registered Agent, if changing | ne position. |
| | / | |

| movellan | d title, name, and address of | each Officer and/or Director being | added: |
|-----------------|---|--|--|
| uacn aaai | itional sheets, if necessary) | | |
| itle · · | <u>Name</u> | Address | Type of Actio |
| | | | |
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| | | | ☐ Add ☐ Remove |
| | | | LI Kemove |
| | | | □ Add |
| | / | | |
| | (| | |
| | | | |
| If amend | ling or adding additional Art | icles, enter change(s) here: | |
| (attach ac | lditional sheets, if necessary). | (Be specific) | |
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| lf an an | nendment provides for an exc | change, reclassification, or cancellat | tion of issued shares |
| <u>provisio</u> | ns for implementing the ame | endment if not contained in the ame | ndment itself: |
| (if no | ot applicable, indicate N/A) | | |
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| Consider date | (date of adoption is required) $09-10-09$ |
|---|--|
| — Capter of ann | 09-10-0 |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/were add by the shareholders was/were su | opted by the shareholders. The number of votes cast for the amendment(s) of the approval. |
| The amendment(s) was/were approvided for | proved by the shareholders through voting groups. The following statemed each voting group entitled to vote separately on the amendment(s): |
| "The number of votes cast f | for the amendment(s) was/were sufficient for approval |
| by | .,, |
| (voti | ing group) |
| action was not required. | opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder |
| Dated | 9-25-09 Gek |
| Signature | Elk |
| (By a dir selected, | rector, 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 d fiduciary by that fiduciary) |
| | ERIC LEE ROSARIÒ (Typed or printed name of person signing) |
| | (Typed or printed name of person signing) |
| | PRESIDENT |
| | (Title of person signing) |