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## **COVER LETTER**

Division of Corporations
NAME OF CORPORATION: Phyloge Consulting Services, Inc. DOCUMENT NUMBER: POGODOD 54041
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Angel Wood-Mark Name of Contact Person  Phina Zee Consulting Services, Inc. Firm/ Company  1812 S. Valvico Pol Address  Valvico, FL 335910 City/ State and Zip Code  AMR & Phina Zee Consulting Code
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (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 The Articles of Amendment
Articles of Incorporation
Phinazee Consulting Services, Inc.  (Name of Corporation as currently filed with the Florida Dept. of State)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Phinazee Construction 7 Consulting Services, Inc. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  Suite * H Brandon, FL 33511
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  Suite H  Brandon, FL 33511
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 address:
Name of New Registered Agent
New Registered Office Address:  (Florida street address)  New Registered Office 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
DECIMENT OF FICH ACEDICION ARCHITE (I CHUIREITE

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</u>	John Do	<u>e</u>				
X Remove	<u>V</u> <u>Mike Jones</u>						
X Add	<u>sv</u>	SV Sally Smith					
Type of Action (Check One)	Title		Name	<u>Addres</u> s			
1) Change		_		<del></del>			
Add							
Remove							
2) Change							
Add							
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3) Change	• • • • • • •						
Add							
Remove							
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oviși	ons for implementing the amendment if not contained in the amendment itself: not applicable, indicate N/A)
(1)	по аррисате, такие пому
N	A
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 3 ho 15	
Signature Dya director, president or other officer – if directors or officers have not been	_
selected by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Angel Wood-Mark (Typed or printed name of person signing)	<del></del>
President Owner	