

P09000054768

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

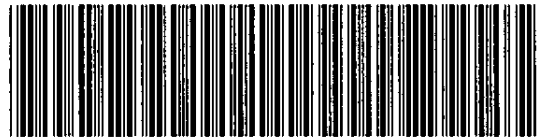
(Business Entity Name)

(Document Number)

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09 AUG -7 PM 2:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Handwritten signature and date 8/14/09*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** D & D DEVELOPMENT & BUSINESS SERVICES, INC.

**DOCUMENT NUMBER:** P09000054768

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DONNA RAINEY

Name of Contact Person

CONTRACTORS NOTICING & SMALL BUSINESS SERVICES

Firm/ Company

103 E. DR. MARTIN LUTHER KING BLVD.

Address

PLANT CITY, FL 33563

City/ State and Zip Code

BUSDRIVERQT@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DONNA RAINEY

Name of Contact Person

at ( 813 )

752-3070

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 &  
Certificate of Status

☐ \$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  
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  
of

D & D DEVELOPMENT & BUSINESS SERVICES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P0900054768

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*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)

414 CHAMPLAIN

BELOEIL, QC

J3G 4M3

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

302 S. COLLINS ST. # 7

PLANT CITY, FL 33563

**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:

DEVIN JAMES

New Registered Office Address:

1304 DER RD.

(Florida street address)

PLANT CITY

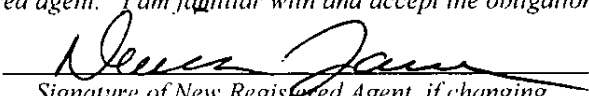
(City)

, Florida 33566

(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

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TALLAHASSEE, FLORIDA

**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>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
D	DONNA RAINEY	103 E. DR. MARTIN LUTHER KING PLANT CITY FLORIDA 33563	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
D	DEBRA CALHOUN	103 E. DR. MARTIN LUTHER KING PLANT CITY FLORIDA 33563	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
D	JUNE V. HOLMES	414 CHAMPLIN BELOEIL, QC J3G 4M3	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**

*(attach additional sheets, if necessary). (Be specific)*

ARTICLE II CHANGE ADDRESS TO 302 S. # 7 COLLINS PLANT CITY, FL 33563

ARTICLE II CHANGE MAILING ADDRESS 302 S.# 7 COLLINS PLANT CITY, FL 33563

**F. 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)*

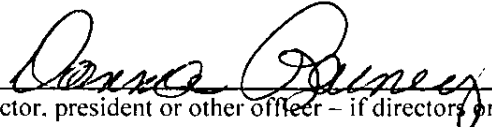
The date of each amendment(s) adoption: AUGUST 4, 2009  
(date of adoption is required)  
Effective date if applicable: AUGUST 4, 2009  
(no more than 90 days after amendment file date)

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)
- ☐ 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.

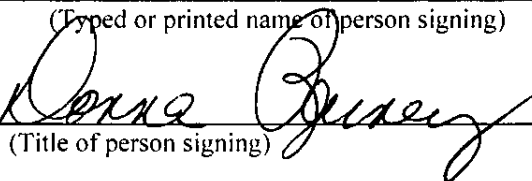
Dated AUGUST 4, 2009

Signature

  
(By a 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)

DONNA RAINEY

(Typed or printed name of person signing)

  
(Title of person signing)