

P09000055239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

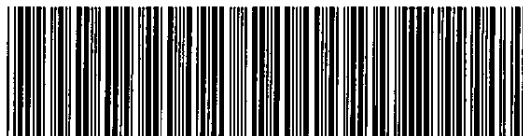
(Document Number)

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09 SEP 30 AM 11:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

T Roberts SEP 30 2009



RECEIVED SEP - 3 2009

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 31, 2009

JOHN A. BALDWIN, ESQ.  
BALDWIN & MORRISON, P.A.  
7100 SOUTH U.S. HWY 17-92  
FERN PARK, FL 32730

SUBJECT: THE CELL OF ORLANDO , INC.  
Ref. Number: P09000055239

We have received your document for THE CELL OF ORLANDO , INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document number of the name conflict is #P05000135338 - CELL CORP..

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 309A00029094

*Name  
available after  
9/26/09*

RECEIVED  
2009 SEP 30 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**BALDWIN & MORRISON, P.A.**

ATTORNEYS & COUNSELLORS AT LAW  
7100 SOUTH U.S. HIGHWAY 17-92  
FERN PARK, FLORIDA 32730-2092

JOHN A. BALDWIN  
[Johnab2348@aol.com](mailto:Johnab2348@aol.com)

WILLIAM H. MORRISON  
[Whm7100@aol.com](mailto:Whm7100@aol.com)

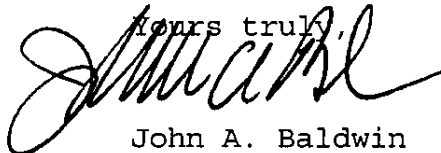
September 28, 2009

TELEPHONE  
(407) 834-1424  
FAX  
(407) 834-4845

Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Madam:

Enclosed please find your letter dated August 31, 2009 and an Articles of Amendment to Articles of Incorporation of The Cell of Orlando, Inc. I believe the name, "THE CELL, INC.", became available after September 26, 2009.

Yours truly,  
  
John A. Baldwin

JAB/dak

Enclosure

Cc: Robert Potchen

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: THE CELL OF ORLANDO, INC.

DOCUMENT NUMBER: P09000055239

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

Please return all correspondence concerning this matter to the following:

John A. Baldwin, Esquire

Name of Contact Person

Baldwin & Morrison, P.A.

Firm/ Company

7100 South U.S. Hwy 17-92

Address

Fern Park, FL 32730

City/ State and Zip Code

bob@premelters.com

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

For further information concerning this matter, please call:

John A. Baldwin, Esquire

Name of Contact Person

at ( 407 )

834-1424

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

THE CELL OF ORLANDO, INC.

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

P09000055239

(Document Number of Corporation (if known))

FILED  
09 SEP 30 AM 11:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 CELL, 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**)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

(Mailing address **MAY BE A POST OFFICE BOX**)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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)

\_\_\_\_\_

\_\_\_\_\_, Florida

(City)

(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*

**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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input 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)*

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**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)*

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The date of each amendment(s) adoption: August 20, 2009  
(date of adoption is required)

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)

☐ 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 8-20-2009

Signature [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)

ROBERT T. POTCHEN  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)