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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phon	e #)
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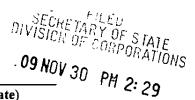
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:	ISLAND OASIS ARCADE CLUB INC	
DOCUMENT NUI	MBER:P09000057730		
The enclosed Articl	les of Amendment and f	ee are submitted for filing.	
Please return all con	rrespondence concerning	this matter to the following:	
_		GREGORY R LEACH	
		Name of Contact Person	
_	ISLANI	O OASIS ARCADE CLUB INC	
		Firm/ Company	
	681 TROJAN RD		
		Address	
		VENICE, FL 34293	
_		City/ State and Zip Code	
	islaı E-mail address: (to be	ndoasis@ymail.com used for future annual report notification)	
For further information	tion concerning this mat	er, please call:	
Gr	egory R Leach	at (941) 412-4558	
Name o	of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check	for the following amou	nt made payable to the Florida Department of State:	
□ \$35 Filing Fee	✓ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Ad Amendment Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**



ISLAND OASIS ARCADE CLUB INC

	-	
0057730		
of Corporation (if kno	own)	
orida Statutes, this F	Clorida Profit Corporation adopts th	e fol
corporation:		
		neu
ignation "Corp," "Inc	c," or "Co". A professional corpor	r the ation
ble: DDRESS)		
<u> </u>		
	n Florida, enter the name of the	
ed office address:		
(Florida street a	address)	
(Florida street a	address), Florida	
	of Corporation (if knowledge) corporation: word "corporation," ignation "Corp," "Internal association," or ble: DDRESS)	of Corporation (if known) dorida Statutes, this Florida Profit Corporation adopts the corporation: The word "corporation," "company," or "incorporated" or ignation "Corp," "Inc," or "Co". A professional corporational association," or the abbreviation "P.A." ble: DDRESS) BOX

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>	Type of Action
<u>VP</u>	JEROME ELLIS	2496 SYLVIA LANE VENICE, FL 34292	
<u>VP</u>	STEVEN ELLIS	2496 SYLVIA LANE VENICE, FL 34292	☑ Add □ Remove
	-,		□ n
	dditional sheets, if necessary). (Be		
provisi	ons for implementing the amendm	ge, reclassification, or cancellation of ent if not contained in the amendm	
(if n	ot applicable, indicate N/A)		

	ent(s) adoption: NOVEMBER 20, 2009
	(date of adoption is required)
Effective date <u>if applicabl</u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s) (<u>CHECK ONE</u>)
The amendment(s) was/ by the shareholders was	were adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	were approved by the shareholders through voting groups. The following statement ided for each voting group entitled to vote separately on the amendment(s):
"The number of vo	tes cast for the amendment(s) was/were sufficient for approval
by	
action was not required.	were adopted by the incorporators without shareholder action and shareholder
Dated_N Signature	OVEMBER 20, 2009
	GREGORY R LEACH (Typed or printed name of person signing)
	PRESIDENT (Title of person signing)