## P09000068074

(Requestor's Name)	<del></del>
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL í
(Business Entity Name)	· · ·
· · · (Document Number)	
Certified Copies Certificates of Status	· ;
Special Instructions to Filing Officer:	

Office Use Only



600160797866

10/02/09--01013--803 \*\*35.00

09 OCT -2 AH 10: 47

Amenel Theurs 10-5-09

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORE	PORATION:	POLLYS EXPRESS INC	<u> </u>
DOCUMENT NU	MBER:	P09000068074	
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	prespondence concerning the	is matter to the following:	
		LYANA SINHORINI	
	М	lame of Contact Person	
POLLYS EXPRESS I			
Firm/ Company			
	5138 WOODRUFF LANE		
Address			
		ACH GARDENS, FL 33418	
	C	ity/ State and Zip Code	
	E-mail address: (to be use	d for future annual report notification)	
For further information	ation concerning this matter,	please call:	
WE	LLINGTON LIRA	at ( 561 ) 59	96-7223
	of Contact Person	at ( 561 ) 59  Area Code & Daytime Tele	ephone Number
Enclosed is a check	k for the following amount n	nade payable to the Florida Depart	ment of State:
☑ \$35 Filing Fee	S43.75 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)
P.O. Box 6	nt Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	e

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

09 0CT -2 AH 10: 47

(Name of Corporation as currently filed with the Florida Dept. of State)  P0900068074  (Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation:  A. If amending name, enter the new name of the corporation:  name must be distinguishable and contain the word "corporation," "company," or "abbreviation "Corp" "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A proname must contain the word "chartered," "professional association," or the abbreviation "Inc.".	TAILLAHASSEE, FLORID
(Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation:  A. If amending name, enter the new name of the corporation:  name must be distinguishable and contain the word "corporation," "company," or "abbreviation "Corp" "Inc.," or "Co.," or the designation "Corp," "Inc," or "Co". A pro-	THOSEE, FINELS
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation:  A. If amending name, enter the new name of the corporation:  name must be distinguishable and contain the word "corporation," "company," or "abbreviation "Corp." "Inc.," or "Co.," or the designation "Corp," "Inc," or "Co". A pro-	· coniu
A. If amending name, enter the new name of the corporation:  name must be distinguishable and contain the word "corporation," "company," or "abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A pre-	<del></del>
name must be distinguishable and contain the word "corporation," "company," or "abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A pro-	pration adopts the following
abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A pre-	
ibbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A pro-	The new
	ofessional corporation
3. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	<del>.</del>
<del></del>	
D. If amending the registered agent and/or registered office address in Florida, enter the	e 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)	
T.	a ui da
(City) (Zip Cod	orida le)
	,
New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligi	eations of the position
петеву ассері іне арронитені аз тедіметей адені. Тат затинат жин ини ассері іне овну	andid at the william.
Signature of New Registered Agent, if changing	

\*c , \* %

## 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>	Address	Type of Action
<u>VP</u>	POLLYANA SINHORINI	5138 WOODRUFF LANE PALM BEACH GARDENS, FL 33418	
			Add Remove
			Add Remove
	ding or adding additional Articles, end dditional sheets, if necessary). (Be spe		
provisi	nendment provides for an exchange, ions for implementing the amendment of applicable, indicate N/A)		
N/A			

The date of each amendment	s) adoption: SEPTEMBER 23, 2009
Effective date if applicable:	(date of adoption is required) SEPTEMBER 23, 2009
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	east for the amendment(s) was/were sufficient for approval
by	"
	(voting group)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	SEPTEMBER 23, 2009
Signature 1	
(By	a director, president or other officer - if directors or officers have not been
	cted, by an incorporator - if in the hands of a receiver, trustee, or other court
appo	sinted fiduciary by that fiduciary)
	WELLINGTON LIRA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)