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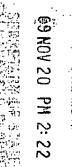
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EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:	IMHOTEP GLOBAL	., INC
DOCUMENT NU	MBER:	P090000883	06
The enclosed Artic	les of Amendment and fee a	are submitted for filing.	
Please return all co	rrespondence concerning th	is matter to the following:	
-		RITA C PUENTES	
	1	Jame of Contact Person	
	IMH	OTEP GLOBAL, INC	
		Firm/ Company	
-	21	SW 33TH AVENUE	
		Address	
-		MIAMI, FL 33135	,, , , , , , , , , , , , , , , , , , ,
	C	ity/ State and Zip Code	
	rmpud E-mail address: (to be use	entes@aol.com d for future annual report notification	on)
For further informa	tion concerning this matter,	please call:	
RI	TA C PUENTES	at (<u>305</u>) Area Code & Daytime	447 0074
Name	of Contact Person	Area Code & Daytimo	e Telephone Number
Enclosed is a check	for the following amount n	nade payable to the Florida De	epartment of State:
2 \$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclose	S52.50 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 C	

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

IMHOTEP GLOBA, INC
(Name of Corporation as currently filed with the Florida Dept. of State)
P09000088306

(Document Nu	umber of Corporation (if known)			
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation:		la Profit Corporation add	pts the foll	lowin
A. If amending name, enter the new name	of the corporation:			
IMHOT	ΓΕΡ GLOBAL, INC.		The new	,
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pr	he designation "Corp," "Inc," o	r "Co". A professional c	ed" or the corporation	ı
B. Enter new principal office address, if ap	plicable:		_	
(Principal office address MUST BE A STRE	CET ADDRESS)			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF) D. If amending the registered agent and/or new registered agent and/or the ne	registered office address in Flo	orida, enter the name of l	99 NOV 20 PM 2: 22	
new registered agent and/or the new reg	gistered office address:			
Name of New Registered Agent:	<u></u>			
New Registered Office Address:	(Florida street addre	ess)		
		, Florida		
	(City)	(Zip Code)		
New Registered Agent's Signature, if chang I hereby accept the appointment as registered	agent. I am familiar with and a		e position.	
	Signature of New Registered Age	ent, 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>	Name	Address	Type of Action
 			Add
			☐ Add☐ Remove
	<u>. </u>		□ n
	ding or adding additional Articles, ending or adding additional sheets, if necessary). (Be s		
<u>provis</u>	mendment provides for an exchange ions for implementing the amendmer		
(if)	not applicable, indicate N/A)		

The date of each amendment(s)	adoption: 11/17/2009
F66-44-4-46	(date of adoption is required)
(n	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
	t for the amendment(s) was/were sufficient for approval
by	33
(ve	oting group)
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated 11/17/2	2009
selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	RITA C PUENTE
_	(Typed or printed name of person signing)
	PRESIDENT
_	(Title of person signing)