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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION:	SKAFF CON	SULTING SERV	ICES INC
DOCUMENT NU	UMENT NUMBER: P09000098523			
The enclosed Artic	cles of Amendment a	nd fee are submitte	ed for filing.	
Please return all co	orrespondence concer	ning this matter to	the following:	
	JOYCE SKAFF			
		Name of Cont	act Person	
		Firm/ Cor	npany	
	PO BOX 486			
	Address			
	POMONA PARK, FL 32181 City/ State and Zip Code			
	E-mail address: (skaffjl@hotmai to be used for future a	l.com	
For further inform	ation concerning this	matter, please call	:	
	RENDA JEPSON	at (///	328-4164
	e of Contact Person k for the following ar	nount made payab	Area Code & Daytime Te	
☑ \$35 Filing Fee	\$43.75 Filing Fee Certificate of Stat	tus Cer	.75 Filing Fee & tified Copy ditional 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		Amer Divis Clifto 2661	t Address Indment Section It ion of Corporations In Building Executive Center Circhassee, FL 32301	le

Articles of Amendment Articles of Incorporation

FILED

2011 MAR 22 AM 11: 24

SKAFF CONSULTING SERVICES INC. (Name of Corporation as currently filed with the Florida Dept. of StateECRETARY OF STATE TALLAHASSEE.FLORID*i* P09000098523 (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: 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 (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>	Type of Action
TREAS	JOANN L BOLLINGER	PO BOX 882 POMONA PARK, FL 32181	
	ding or adding additional Articles, endeditional sheets, if necessary). (Be specified)		
<u>provisi</u>	nendment provides for an exchange, to the same of the		

The date of each amendmen	t(s) adoption: MARCH 01, 2011
Efféctive date if applicable:	MARCH 01, 2011 (to more than 00 down often amendment file date)
enterior date in appricable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated	3/18/11
Signature _	Joya L Duff
sel	a director, president or other officer – if threctors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	JOYCE SKAFF
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)