## P10000001180

(Requestor's Name)
(Address)
(Address)
(
(0) 10) 17 (0)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Outlied Code
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
•
1
И

Office Use Only



200166332142

01/28/10--01020--015 \*\*35.00

TAPLER SEE FLESS

Amend (2/3/10)

## **COVER LETTER**

Division of Corporations	•	
NAME OF CORPORATION: UShua	Smith Inc.	
DOCUMENT NUMBER: P100000011	80	
The enclosed Articles of Amendment and fee are su	abmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Joshua B. S	SMITH of Contact Person	<u> </u>
Josh Smith	Inc.	
alu NEl Cen	tro Blud.	·
Panama City Bo	ch, Fla 30413 state and Zip Code	•
Tekdis out a Mail. C E-mail address (to be used for	future annual report notification)	<u>.</u>
For further information concerning this matter, plea	se call:	
司可知 Smith Gillian Glover is Name of Contact Person	Area Code & Daytime Tele	
Enclosed leacheck for the following amount made	payable to the Florida Depart	tment of State:
\$35 Rang Fee \$\text{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 Circl	e

Tallahassee, FL 32301



January 21, 2010

JOSHUA B. SMITH JOSHUA SMITH INC. 210 N. ELCENTRO BLVD PANAMA CITY BEACH, FL 32413

SUBJECT: JOSHUA SMITH INC. Ref. Number: P10000001180

We have received your document for JOSHUA SMITH INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6964.

Letter Number: 910A00001724

Irene Albritton
Regulatory Specialist II

## Articles of Amendment to Articles of Incorporation of



bshua Smith Inc		Dept. of State)
(Name of Corporation as curre	ntly filed with the Florida	Dept. of State)
710000001180	1 60 4 (61	
(Document Num	ber of Corporation (if know	vn)
ursuant to the provisions of section 607.1006 mendment(s) to its Articles of Incorporation:	, Florida Statutes, this Flo	orida Profit Corporation adopts the follow.
. If amending name, enter the new name of	the corporation:	
		The new
ame must be distinguishable and contain to bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "prof	designation "Corp," "Inc,	" or "Co". A professional corporation
. Enter new principal office address, if appl	icable:	
Principal office address <u>MUST BE A STREE</u> T	(ADDRESS)	
		<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	F ROX)	
(Maning unit cos MATI DE ATTOST OTTE		
). If amending the registered agent and/or re	egistered office address in	Florida, enter the name of the
new registered agent and/or the new regis		
Name of Name Basistand I de auto		
Name of New Registered Agent:		
New Registered Office Address:	(Florida street ad	ddress)
		, Florida
_	(City)	(Zip Code)
lew Registered Agent's Signature, if changin		and the second and the second accordance to th
hereby accept the appointment as registered as	geni. I am jamiliar with an	ia accept the obligations of the position.
	anature 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
reasure/	Gillian E. Glover	210 NEI Centro Blud Parama City Bch, Fla 32413	Add . Remove
	•		☐ Add ☐ Remove
<u></u>			☐ Add ☐ Remove
	ing or adding additional Articles, end ditional sheets, if necessary). (Be spe		
		· · · · · · · · · · · · · · · · · · ·	· .
provisio	nendment provides for an exchange, in the implementing the amendment of applicable, indicate N/A)		

The date of each amendment(s) adoption:
Effective date if applicable: $1 - 30 - 2010$
(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 stateme 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 shareholde action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 1-28-2010
Signature Joshume B Smith
(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)
Joshua B. Sm. 46
Toshua B. Sun'Hu  (Typed or printed name of person signing)
President
(Title of person signing)