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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : MORAN, KIDD, LYONS, JOHNSON & BERKSON

Account Number: 120000000003 : (407)841-4141 Phone Fax Number : (407)841-4148

**Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please. **

il Address:	
· · · · · · · · · · · · · · · · · · ·	
	TO A REPORT OF THE PROPERTY OF STREET OF STREET STR

COR AMND/RESTATE/CORRECT OR O/D RESIGN MAYBE TONIGHT, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
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5315-1

SEP 1 0 2012

T. ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MAYBE TONIGHT, INC. P10000002849 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Scott E. Johnson (Name of Contact Person) Moran Kidd Lyons Johnson & Berkson, P.A. (Firm/ Company) 111 N. Orange Avenue, Suite 900 (Address) Orlando, Florida 32801 (City/ State and Zip Code) ireckert@morankidd.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

June Reckert

(Name of Contact Person)

at (407) 841-4141 (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

Certificate of Status

■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)

□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

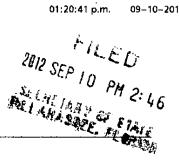
Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



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(Name of Corporation as currently filed with the Florida Dept. of State)

P10000002849

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporation		•			
A. If amending name, enter the new na	me of the corporati	<u>on:</u>			
name must be distinguishable and contain "Company" or "Co." may not be used in		ion" or "incorporated		The ne r "Inc.	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		5036 Dr. Phillips Blvd.			
		Orlando, FL 32819			
C. Enter new mailing address, if applie		5036 Dr. Phillips Blvd.			
		Orlando, FL 32819			
D. If amending the registered agent and new registered agent and/or the new			enter the name of the		
Name of New Registered Agent:	Nancy Fitzp				
	5036 Dr. Phillips Blvd.				
New Registered Office Address:		(Florida street address)			
	Orlando		, Florida 32819		
	(City)	_	(Zip Code)		
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	anging Registered red agent. I am fa	Ageny. niliaf willyand accept t	he obligations of the position.		

Signature of New Registered Agent, if changing

Page 1 of 4

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change X Remove X Add	Y Mik	n <u>Doe</u> e Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u>D</u>	Copeland, Debra	6424 Cartmel Lane
Add			Windermere, FL 34786
X Remove			
2) Change	D	Fitzpatrick, Madelyn	537 Winding Hollow Way
Add			Ocoee, FL 34761
X Remove			
3) Change		,	
Add			
Remove			
4) Change			
Add			***************************************
Remove			
5) Change			
Remove			
6) Change			
Add			
Remove		Day 2 44	

If amending or adding additional Articletach additional sheets, if necessary).	(Be specific)
The state of the s	· · · · · · · · · · · · · · · · · · ·
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(((H12000223080 3)))	
The date of each amendment(s) : Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment(s) val.
Dated Signature (By the character)	inhan or vice chairman of the board, president or other officer-if directors seen selected, by an incorporator – if in the hands of a receiver, trustee, or a appointed fiduciary by that fiduciary)
Nancy Fit	zpatrick
	(Typed or printed name of person signing)
President	
	(Title of person signing)