## P10000009462

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	#)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION: ZEGEN THEMOTIONAL, INC			
DOCUMENT NUMBER: P1000009462			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
LILIANA GONZALEZ  Name of Contact Person			
266EN Tutemotion, Inc.  Firm/ Company			
10552 Walnut Valley Drive			
Boynton Beach FL 33437			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Contact Person at (56) 503-1878			
Enclosed is a check for the following amount made payable to the Florida Department of State:			
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 Center Circle			

Tallahassee, FL 32301

## **Articles of Amendment**

PH 3: 18 **Articles of Incorporation** (Name of Corporation as currently filed with the Florida Bept. of State) P10000009462 (Document Number of Corporation (if known)

A. If amending name, enter the new name  N/A	of the corpora	tion;	The new	
name must be distinguishable and contai abbreviation "Corp.," "Inc.," or Co.," or I name must contain the word "chartered," "p	the designation	"Corp," "Inc," or "Co	y," or "incorporated" or the o". A professional corporation	
B. Enter new principal office address, if a (Principal office address MUST BE A STR.)	pplicable: EET ADDRESS			
C. Enter new mailing address, if applicat (Mailing address <u>MAY BE A POST OF</u>		10552 u Boyutou	bland Valley Div Beach, FL 3348	[( S
D. If amending the registered agent and/onew registered agent and/or the new recommendation and the ne			enter the name of the	
Name of New Registered Agent:		<u>ea Servan</u> Walnut Va		
New Registered Office Address:	(Fl	lorida street address)	Florida 33437 (Zip Code)	
New Registered Agent's Signature, if chan I hereby accept the appointment as registered	ging Registered	d Agent:		

Page 1 of 3

## 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]

Title Name VP Andrea C. Servano	Address 10552 Walnut Valley Drive Boynton Bra	Type of Action  Add Remove
<del></del>		
E. If amending or adding additional Articles, enter (attach additional sheets, if necessary). (Be spec		
F. If an amendment provides for an exchange, reprovisions for implementing the amendment if (if not applicable, indicate N/A)		
NONE / N/FE		

The date of each amendment	(s) adoption: tell 1st/2010
Effective date <u>if applicable</u> :	Teb 1st (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statement d 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)
	re adopted by the board of directors without shareholder action and shareholder
action was not required.	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	elawary 1744 2010
Signature	Klarrela Javala
sele	a director, president or other officer – if directors or officers have not been octed, by an incorporator—If in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	LILLANA GONZALEZ
	(Typed or printed name of person signing)
	Presupent
	(Title of person signing)