# P10000013443

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SECRETARY OF STATE

APPROVID

CASA 6

#### . COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION:	H.R. CEPPELIN, INC	<u> </u>	
DOCUMENT NU	DCUMENT NUMBER: P10000013443			
The enclosed Artica	les of Amendment and fee a	re submitted for filing.		
Please return all co	respondence concerning thi	s matter to the following:		
-		OBERTA CORSO		
	N	ame of Contact Person		
_	H.!	R. CEPPELIN, INC		
		Firm/ Company		
_	1 DEERWOOD DRIVE			
		Address		
	HOM	 MOSASSA, FL 34446		
	C	ity/ State and Zip Code		
	BGERBER@ E-mail address: (to be use	JANOSKOCPA.COM d for future annual report notification)		
For further informa	tion concerning this matter,	please call:		
BERN	ADETTE GERBER	at ( 352 ) 6  Area Code & Daytime Te	84-8440	
Name	of Contact Person	Area Code & Daytime Te	lephone Number	
Enclosed is a check	for the following amount m	nade payable to the Florida Depar	tment of State:	
☑ \$35 Filing Fee	\$43.75 Filing Fee & 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 Circ Tallahassee, FL 32301	le	

### **Articles of Amendment Articles of Incorporation** of

#### H.R. CEPPELIN, INC

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

#### P10000013443

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300.01.0	······································
er of Corporation (if known	wn)
Florida Statutes, this <i>Fl</i>	orida Profit Corporation adopts the fol
ne corporation:	
SCUITS & BONES,	INC The new
e word "corporation," esignation "Corp," "Inc ssional association," or	"company," or "incorporated" or the " or "Co". A professional corporation the abbreviation "P.A."
able:	
<u>ADDRESS</u> )	
<del></del>	
<del></del>	
<u>BOX</u> )	
istered office address in red office address:	Florida, enter the name of the
(Florida street a	ddress)
<u> </u>	, Florida
(City)	(Zip Code)
Registered Agent:	nd accept the obligations of the position.
<u>z wiii jwiiissus viilis u</u>	m accept the obligations of the position.
nature of New Registered	Agent if changing
	ref Corporation (if known for the corporation:  SCUITS & BONES, word "corporation," esignation "Corp," "Incisional association," or able: 4DDRESS)  istered office address in red office address:  (Florida street and (City)  Registered Agent: Int. I am familiar with and interest

## 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> **Address Type of Action** ☐ Add ☐ Remove Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendmen	t(s) adoption: FEBRUARY 12, 2010
Effective date <u>if applicable</u> :	FEBRUARY 12, (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/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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
,	/17/10
Signature	Roberta Conso
	a director, president or other officer - if directors 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)
<b>~</b> PF	annea materialy of that materialy)
	ROBERTA CORSO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)