P10000028928

| (Requestor's Name) |
|---|
| (Requestors Name) |
| |
| (Address) · |
| |
| (Address) |
| (1117-11) |
| |
| (City/State/Zip/Phone #) |
| |
| PłCK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |
| |
| |
| |
| |

Office Use Only



500184834825

None Charge

08/31/10--01028--011 **35.00

SECRETARY OF STATE

FILED

9/1/10

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORA | ATION: | R.S. COLLINS PA | | |
|--|--|---|---|--|
| DOCUMENT NUMBE | R: | P10000028928 | | |
| The enclosed Articles of | Amendment and fee are | submitted for filing. | | |
| Please return all correspondent | ondence concerning this | matter to the following: | | |
| | · · · · · · · · · · · · · · · · · · · | ITA COLLINS | | |
| | Nan | ne of Contact Person | | |
| Firm/ Company | | | | |
| PO BOX 546948 | | | | |
| Address | | | | |
| | | EACH, FL 33154-6948 | | |
| | • | / State and Zip Code | | |
| | rita@ri E-mail address: (to be used t | tacollins.com or future annual report notification) | | |
| For further information | concerning this matter, p | lease call: | | |
| RITA | COLLINS | at (305) 2 Area Code & Daytime Tel | 18-2277 | |
| Name of Con | ntact Person | Area Code & Daytime Tel | ephone Number | |
| Enclosed is a check for t | the following amount ma | de payable to the Florida Depar | tment of State: | |
| | \$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 Circle | le | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

Articles of Incorporation of

2010 AUG 31 AM 9: 47

| · | COLLINS PA | SECRETARY OF STATE TALLAHASSEE, FLORIDA |
|--|---|--|
| (Name of Corporation as cur | rently filed with the Florida Dept. | of State |
| P1 | 0000028928 | |
| (Document Nu | imber of Corporation (if known) | |
| Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation | | rofit Corporation adopts the following |
| A. If amending name, enter the new name | of the corporation; | |
| RITA | S. COLLINS, PA | The new |
| name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or ti name must contain the word "chartered," "p. | he designation "Corp," "Inc," or "C | o". A professional corporation |
| B. Enter new principal office address, if an (Principal office address MUST BE A STRE | | |
| | | |
| C. Enter new mailing address, if applicab (Mailing address MAX BE A POST OF) | | |
| D. If amending the registered agent and/or new registered agent and/or the new registered agent agen | | a, enter the name of the |
| Name of New Registered Agent: | JOHN CULLEN | |
| New Registered Office Address: | 12401 ORANGE DR SUITE (Florida street address) | 127_ |
| New Registered Office Audress. | , | |
| | DAVIE (City) | , Florida <u>33330</u> (Zip Code) |
| New Registered Agent's Signature, if change I hereby accept the appointment as registered. | ging Registered Agent: lagent. I am familiar with and accer Signature of New Registered Agent, | len_ |

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> Name 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 amendment(s) | adoption: 8-26-10 |
|--|---|
| Effective date if applicable: | (date of adoption is required) |
| | no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/were a by the shareholders was/were | adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval. |
| | approved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s): |
| "The number of votes cas | st for the amendment(s) was/were sufficient for approval |
| by | oting group) |
| (ve | oting group) |
| The amendment(s) was/were a action was not required. | adopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/were a action was not required. | adopted by the incorporators without shareholder action and shareholder |
| Dated | |
| Signature | Tota Call |
| (By a c | director, president or other officer - if directors or officers have not been |
| | ed, by an incorporator – if in the hands of a receiver, trustee, or other court ated fiduciary by that fiduciary) |
| | RITA COLLINS |
| - | (Typed or printed name of person signing) |
| | PRESIDENT |
| - | (Title of person signing) |