P10000030398

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	→ #)
PICK-UP	☐ WAIT	MAIL
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Roberts APR 28 2010

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	Accurate Enterprises of Central Fl., Inc.		
DOCUMENT NU	MBER:	P10000030398		
The enclosed Artic	cles of Amendment and	I fee are submitted for filing.		
Please return all co	owespondence concerni	ing this matter to the following:		
		Marc A. Conover		
		Name of Contact Person		
	Accum	ate Enterprises of Central Fl., Inc.		
		Firm/ Company		
	**************************************	4165 Vancouver Avenue		
		Address		
		Cocoa, FL 32926		
		City/ State and Zip Code		
	t-mail address: (fo	be used for future annual report notification)		
For further inform	ation concerning this m	atter, please call:		
	farc a. Conover	at (407) 621-1999		
Name	e of Contact Person	Arca Code & Daytime Telephone Number		
Enclosed is a chec	k for the following amo	ount made payable to the Florida Department of State:		
\$35 Filing Fee	S43 75 Filing Fee & Certificate of Status			
Mailing Address Amendment Section		Street Address Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327		Cliffon Building		
Tallahassee, FL 32314		2661 Executive Center Circle Tallabasses Et 32301		

to Articles of Incorporation of

	of	•	1-11 E
Accurate Enterp	rises of Central Fl.	, Inc. 10 ,	APR 25
(Name of Corporation as curre	ently filed with the Florid	la Dept. of State)	APR 26 AM
P10	0000030398	TA TA	HASSEE. FLO
(Document Nun	nber of Corporation (if kno	nwn)	TOSEE. FLO
fursuant to the provisions of section 607,100 mendment(s) to its Articles of Incorporation:	6, Florida Statutes, this F	Torida Profit Corporation a	dopts the follo
. If amending name, enter the new name o	f the corporation:		
			The new
. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE) 1. If amending the registered agent and/or the new registered agent and/or the new registered agent.	CE BOX)	in Florida, enter the name (of the
Name of New Registered Agent:			
New Registered Office Address:	(Florida street d	address) ,	
		, Florida	
	(City)	(Zip Code)	
ew Registered Agent's Signature, if changing	ng Registered Agent:		
hereby accept the appointment as registered a	igent. I am familiar with a	and accept the obligations of	the position.
	Signature of New Registere	d Agent, if changing	

removed and title, name, and nutress of each Officer and/or Director being additional sheets, if necessary)

<u>Title</u>	Name .	Address	Type of Action
<u> </u>	Marc A. Conover	4165 Vancouver Ave Cocoa, Fl 32926	□ Add □ □ Remove
<u>VP</u>	Laudelina Martinez	11197 Wellshire Lane Frisco, TX 75035	☐ Add ☐ Remove
<u>P</u>	Laudelina Martinez	11197 Wellshire Lane Frisco, TX 75035	☐ Add ☐ Remove
	ding or adding additional Articles, idditional sheets, if necessary). (Be		<i>*</i>
provisi		ze, reclassification, or cuncellation of ent if not contained in the amendme	
	·	· · · · · · · · · · · · · · · · · · ·	
<u></u>			

(aque	47	adoption	13	requirea,

Reflective date if applicable: 04/20/2010

(no more than 90 days after amendment file date)

Adoption of Amendment(5)	(<u>CHECK ONE)</u>
	re adopted by the shareholders. The number of votes east for the amendment(s)
	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	,
J	(voting group)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re-adopted by the incorporators without shareholder action and shareholder
DatedC	4/20/2010
sele	a director, president or other officer – if directors of officers have not been octed, by an incorporator—if in the hands of a receiver, trustee, or other count ointed fiduciary by that fiduciary)
	Laudelina Martinez
	(Typed or printed name of person signing)
	President
	(Title of person signing)