P10000031665

(Re	equestor's Name)			
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PICK-UP	WAIT	MAIL		
(В	usiness Entity Nan	ne)		
(Document Number)				
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SECNETARY OF STATE
TALLAHASSEE, FIODIN

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	JAMIN	FINANCIAL	GROUP CO*
DOCUMENT NUMBER: PIC	000031	665	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Amendment as	nd fee are subm	itted for filing.	* Note corporal
Please return all correspondence concer	ning this matter	to the following:	Chame FROM KENT FIN
KEHIN	IDE - Name of C	HOMAS ontact Person	hanging Corporat Changing Kenny's name from Kenny's pany for Gamin Fin GROUP CO.
	Firm/ C	Company	
1373 <i>a N</i>	W 22N	D PL dress	
SUNRISE	FL City/ State:	33323 and Zip Code	
		epplepc - Corre annual report notification)	<u>m</u>
For further information concerning this	matter, please c	all:	
KEHINDE THOW Name of Contact Person	-		
Enclosed is a check for the following ar	nount made pay	rable to the Florida Departr	ment of State:
\$35 Filing Fee \$43.75 Filing Fee Certificate of Star	tus —	\$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	An Div Cli	reet Address nendment Section vision of Corporations fton Building S1 Executive Center Circle	

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 22, 2011

KEHINDE THOMAS KENNY'S COMPANY 13732 NW 22ND PL SUNRISE, FL 33323

SUBJECT: KENNY'S COMPANY Ref. Number: P10000031665

We have received your document for KENNY'S COMPANY and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$13.75 is due.

Amendments for Florida profit corporations are filed in compliance with section 607,1006, Florida Statutes. Please see the enclosed information.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist Supervisor

Letter Number: 411A00004424

SECTION OF STATE TAILS AND A STATE TAILS AND A STATE OF STATE TAILS AND A STATE OF STATE TAILS AND A STATE OF STATE AND A STATE OF STATE AND A STATE OF STATE AND A STATE AND

Articles of Amendment

to

Articles of Incorporation

of .
KENNYIS COMPANY
(Name of Corporation as currently filed with the Florida Dept. of State)
<u>P10000031665</u>
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) AND SEE OF PH
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
new registered agent and/or the new registered office address:
Name of New Registered Agent:
New Registered Office Address: (Florida street padress)
, Florida
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing
Signature of New Registered Agent, if Changing

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
		1	Add Remove
		N/M	
	ditional sheets, if necessa	N/R	
provision	endment provides for a ns for implementing the t applicable, indicate N/A	n exchange, reclassification, or cancellation of samendment if not contained in the amendment	f issued shares, ent itself:
		N/X	
		/	

03/08/2011 12:28 850-24	45-6897 /	FL DEPT OF STATE	PAGE
The date of each amendment(s) adoption: $3/1$	2011	
Effective date if applicable:	(date o	3/1/201	· ·
((no more than 90 days af	ter améndment file date)	
Adoption of Amendment(s)	(CHECK ON	(E)	
The amendment(s) was/were by the shareholders was/were		ders. The number of votes cast fo	or the amendment(s)
		olders through voting groups. The stilled to vote separately on the an	
"The number of votes ca	ast for the amendment(s)	was/were sufficient for approval	
by	voting group)		
The amendment(s) was/were action was not required.	adopted by the board of	directors without shareholder act	ion and shareholder
The amendment(s) was/were action was not required.	adopted by the incorpor	ators without shareholder action a	and shareholder
Dated	ARCH 8, 20	<u> </u>	
Signature (By a selec	director, president or ot	ner officer – if directors or officer if in the hands of a receiver, trust	
	KEHIND:	E HOMMS inted name of person signing)	
	\sim	NT & CED	
	(Title of person	signing)	