## P10000054194

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ALLAHASSEE, FLORIDATE

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## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

**Division of Corporations** NAME OF CORPORATION: YALSIDENTIAL CLICK ENTERPRISE INCURPORATED DOCUMENT NUMBER: Y/ODOW 54194 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee ■ \$43.75 Filing Fee & □ \$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section **Division of Corporations Division of Corporations** 

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

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

Providential Click	FNYERDI	ise Innardi	orated		
(Name of Corporation as curren					
P0000054794					
(Document Numb	er of Corporati	on (if known)			
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statute	es, this <i>Florida Pro</i>	fit Corporation add	opts the fo	ollowing
A. If amending name, enter the new name of t	he corporation	<u>ı:</u>			
				The ne	w
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the diname must contain the word "chartered," "profes	lesignation "Co	orp," "Inc," or "Co	". A professional of	ed" or th	ie
B. Enter new principal office address, if applic	eable:				
(Principal office address MUST BE A STREET				_ =	TAL SE
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>E <b>BOX</b></u> )			OCT -7 AH 8: 28	PRETARY OF STATE
D. If amending the registered agent and/or reg new registered agent and/or the new register			enter the name of	<u>the</u>	
Name of New Registered Agent:					
New Registered Office Address:	(Floria	la street address)			
_			, Florida		
	(City)	ı	(Zip Code)		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age	ent. I am famil	gent: iar with and accept to Registered Agent, if a		e position	

## 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 1 Address Type of Action Mauria Randal MGR 91025 NW IST COURT - Add ☐ 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: OCTOBER 1, 2010		
	(date of adoption is required)	
Effective date if applicable: (no	(date of adoption is required)  more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	oproved by the shareholders through voting groups. The following statement reach 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	."	
(voi	ting group)	
The amendment(s) was/were acceptation was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and shareholder	
Dated 10 4	2010	
Signature (	ty have	
selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
_	Anthony D. Nunes (Typed or printed name of person signing)	
_	President	
	(Title of person signing)	