# P10000058020

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TALL AHASSEE FLORIO

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	lastingcreations Inc			
DOCUMENT NUMBER:	P10000058020			
The enclosed Articles of Amenda	ent and fee are submitted for filing.			
Please return all correspondence	oncerning this matter to the following:			
	JERRY RAY COMER			
	Name of Contact Person			
LASTINGCREATIONS INC				
	Firm/ Company			
	5665 PALM AVE			
	Address			
	PORT ORANGE FL 32127  City/ State and Zip Code			
E-mail ac	lastingcreationsinc@gmail.com lress: (to be used for future annual report notification)			
For further information concerning	g this matter, please call:			
	at ( <u>386</u> ) <u>2749345</u>			
Name of Contact Perso	·			
Enclosed is a check for the follow	ing amount made payable to the Florida Department of State:			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building			

2661 Executive Center Circle

Tallahassee, FL 32301

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



(Name of Corporation as currently filed with the Florida Dept. of State SECRE FARY OF STATE TALLAHASSEE, FLORIDA

(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:

me must be distinguishable and contain breviation "Corp.," "Inc.," or Co.," or the must contain the word "chartered," "pro	designation "Corp," "Inc,'	or "Co". A prof	fessional corporation
Enter new principal office address, if apprincipal office address MUST BE A STREE		<del></del>	
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)			
If amending the registered agent and/or r new registered agent and/or the new regis		Florida, enter the	name of the
Name of New Registered Agent:		<del></del>	
New Registered Office Address:		drave)	
New Registered Office Address:	(Florida street ad	aress)	
New Registered Office Address:	(Florida street add	Flor (Zip Code,	

# 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
VP	JAMES OTIS COMER	5665 PALM AVE PORT ORAN FLORIDA 32127	Add Remove
<del></del>			_
			_
	ling or adding additional Articles, endditional sheets, if necessary). (Be sp		
<u>provisio</u>	nendment provides for an exchange, ons for implementing the amendmen of applicable, indicate N/A)	reclassification, or cancellation of is t if not contained in the amendment	sued shares, itself:

The date of each amendmen	t(s) adoption: 9/	/22/2010
	9/22/2010	(date of adoption is required)
Effective date if applicable:		90 days after amendment file date)
Adoption of Amendment(s)	(CI	HECK ONE)
The amendment(s) was/we by the shareholders was/w		e shareholders. The number of votes cast for the amendment(s) approval.
		he shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amer	ndment(s) was/were sufficient for approval
by		.,
	(voting group)	
action was not required.		e board of directors without shareholder action and shareholder e incorporators without shareholder action and shareholder
	a director, presidented, by an incor	dent or other officer – if directors or officers have not been reporator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		JERRY RAY COMER
	(Ту	ped or printed name of person signing)
		PRESIDENT
	(Title c	of person signing)