Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000189966 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

: (850)617-6380

From:

Account Name : CSH SERVICES, LLC

Account Number: I20070000160

Phone

: (800)494-3124

: (561)455-9885 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		
		· · · · · · · · · · · · · · · · · · ·	

COR AMND/RESTATE/CORRECT OR O/D RESIGN ROLE MODELS INTERNATIONAL, INC.

nesses consequences of the solutions	name i service o malamata cal es
Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation

ROLE MODELS INTERNATIONAL, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P10000063235 (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: 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) 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: Name of New Registered Agent: New Registered Office Address: (Florida street address) , 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.

Page 1 of 3

Signature of New Registered Agent, if changing

4-10000189966-3

	g the Officers and/or Directors, enter to d title, name, and address of each Off		
	itional sheets, if necessary)	T	L-1000018 9966-3
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>D</u>	STARR REITER	5581 VINTAGE OAKS T DELRAY BEACH FL 334	ERRAQ≣ ☐ Add 184 ☐ Remove
<u>D</u>	GAIL STORTZ-DOWSETT	881 OCEAN DRIVE #13 KEY BISCAYNE FL 331	
			Add Remove
(anach an	dditional sheets, if necessary). (Be spe	cyte)	
pravisio	nendment provides for an exchange, rons for implementing the amendment in ot applicable, indicate N/A)		
	 	•	
		,, ,	

The date of each amendmen	t(s) adoption: _	August 24, 20		4-10000189966-		
Effective date if applicable:		(date of adopti	on is required)	l l		
Enough with the state of the st	(no more than 90 days after amendment file date)					
Adoption of Amendment(s)	Œ	HECK ONE)				
The amendment(s) was/we by the shareholders was/w			e number of votes cas	st for the amendment(s)		
The amendment(s) was/we must be separately provide						
"The number of votes	cast for the ame	endment(s) was/wer	re sufficient for appro-	va l		
by	(voting group)		17 			
The amendment(s) was/was/was/con was not required.	ere adopted by th	ne board of director	s without shareholder	action and shureholder		
The amendment(s) was/we action was not required.	ere adopted by th	ne incorporators wit	thout shareholder actio	on and shareholder		
Dated 0	8/24/2010	> 1				
sel	ected, by an inco		er - if directors or off, bands of a receiver, to			
		Paul La	aroche			
	(T)	yped or printed nar	ne of person signing)			
			ector			
	(Title	of person signing)				