(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bù	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	



900208193239

05/31/11--01026--020 **43.75

Office Use Only

+00789, 0148, 50767, 50611

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: NU marketin	ng service	corp		
DOCUMENT NUM	BER: p10000070695				
The enclosed Articles	s of Amendment and fee are s	submitted for	filing.		
Please return all corre	espondence concerning this m	natter to the fo	ollowing:		
		Raul Duran			
	(Name	of Contact P	erson)		
	(Fi	rm/ Compan	y)		
	107	40 Lenox	Rd	<u></u>	
		(Address)			
	<u>`</u>	er City, FI 3 State and Zip			
	(out)		,		
	E-mail address: (to be u	ised for futur	e annual rej	port notification	on)
For further information	on concerning this matter, ple	ase call:			
Raul Durant		at (308-9927	
(Name	of Contact Person)		(Area Coo	le & Daytime	Telephone Number)
Enclosed is a check for	or the following amount made		_		f State:
\$35 Filing Fee	Certificate of Status	/ Certifi		is	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amei Divis P.O. l	ng Address adment Section ion of Corporations Box 6327 nassee, FL 32314		Division of Clifton Bu 2661 Exec	ent Section of Corporations	



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 3, 2011

Raul Durant 10740 Lenox Rd. Cooper City, FL 33026

SUBJECT: NU-MARKETING SERVICE CORP

Ref. Number: P10000070695

Already paid the

43,75 - you did not

return the check, so

I personne that you still

have it and I Do not

have to send another one

We have received your document for NU-MARKETING SERVICE CORP and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

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) 245-6907.

Annette Ramsey Regulatory Specialist II

Letter Number: 211A00013682

Attach is the 607 - document you sent me to fill out.

Thank your

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

Articles of Amendment to Articles of Incorporation of

FILED

NU-MARKETIO	NG Service Co	OFP 2011 JUN 16 AM 11: 32
(Name of Corporation as curre	ently filed with the Florid	A Dept. of State CRETARY OF STATE SECRETARY OF STATE TALLAHASSEE. FLORIDA
P10000	070695	TALLAHASSEE. FLORIS
	nber of Corporation (if kno	wn)
ursuant to the provisions of section 607.100 mendment(s) to its Articles of Incorporation;	6, Florida Statutes, this F	lorida Profit Corporation adopts the follo
. If amending name, enter the new name of	f the corporation:	
		The new
ame must be distinguishable and contain in obreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "Corp," "Inc	c," or "Co". A professional corporation
Enter new principal office address, if app	olicable:	
rincipal office address <u>MUST BE A STREE</u>	ET ADDRESS)	
	 -	
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)		
	 	
If amending the registered agent and/or r		n Florida, enter the name of the
new registered agent and/or the new regis	stered office address:	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street a	ddress)
		. Florida
	(City)	
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing the property accept the appointment as registered a	ng Registered Agent:	(Zip Code)
ew Registered Agent's Signature, if changing the appointment as registered a	ng Registered Agent:	(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>	<u>Address</u>	Type of Action
	JENNIFER DURANT	COOPER CITY FL 33026	☐ Add Remove
	Christopher DURANT	Cooper City FR 33026	☐ Add ☑ Remove
			☐ Add ☐ Remove
	ending or adding additional Articles, enter of additional sheets, if necessary). (Be specifically additional sheets).		
	N/A		
			-
prov	amendment provides for an exchange, reclasions for implementing the amendment if not applicable, indicate N/A)		
	`		
•			-

The date of each amendment(s) adoption:
Effective date <u>if applicable</u> :	s) adoption: (date of adoption is required) MAY 26, 2011 (no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	"
((voting group)
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	MAY 26,2011
(By a select	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)