P10000079416

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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TALLAHASSEF, FI OBJA

Amend

TR NO

NOV - 3 2010

COVER LETTER

| TO: Amendment Section Division of Corporations | * | | |
|---|--|--|--|
| NAME OF CORPORATION: //g/j | Life Development, Inc. | | |
| DOCUMENT NUMBER: P/OOO | 079416 | | |
| The enclosed Articles of Amendment and fee are sub | omitted for filing. | | |
| Please return all correspondence concerning this mat | ter to the following: | | |
| Michael J. | Delgsgligle Tr. Contact Person | | |
| Night Lite | Levelopment In. | | |
| 845 NN 65 | Address | | |
| For Landerdale, Florida 33311 City/ State and Zip Code | | | |
| | of Mail, Computing annual report notification) | | |
| For further information concerning this matter, please call: Mchgel J. De 95949k J. at (305) Name of Contact Person Area Code & Daytime Telephone Number | | | |
| Enclosed is a check for the following amount made p | payable to the Florida Department of State: | | |
| \$35 Filing Fee \$\ \tag{S43.75 Filing Fee & Certificate of Status} | S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) | | |
| Amendment Section Division of Corporations | Street Address Amendment Section Division of Corporations Clifton Building | | |
| | 2661 Executive Center Circle | | |

Tallahassee, FL 32301

Articles of Amendment

| A | rticles of Amendmer | nt | |
|---|-------------------------------|----------------------------|---------------------------------------|
| Ar | to ticles of Incorporation | on | 20, 11 |
| 1//////// | of | | TASECOF THE 18 |
| Waht to | bild on mei | nt LW | 40.50pm 1 |
| (Name of Corporation as current | the filed with the Florie | do Dont of State) | AHABA PA |
| D/Cod according as current | / med with the Florid | ia Dept. of State | SEFOR LA |
| P100000 19416 | 7 | | ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ |
| (Document Number | er of Corporation (if kno | own) | W.O. |
| suant to the provisions of section 607.1006, endment(s) to its Articles of Incorporation: | Florida Statutes, this F | Florida Profit Corporation | adopts the following |
| If amending name, enter the new name of the | he corporation: | | |
| | | | TI |
| ne must be distinguishable and contain the | word "cornoration" | ' "company" or "incorr | The new |
| previation "Corp.," "Inc.," or Co.," or the de | | | |
| ne must contain the word "chartered," "profes | | | • |
| Enter new principal office address, if applic | rahler | | |
| incipal office address <u>MUST BE A STREET</u> . | | | |
| - | | | |
| | | | |
| | | | |
| Enter new mailing address, if applicable: | E BAY | | |
| (Mailing address MAY BE A POST OFFICE | <u> </u> | | |
| | | | |
| | | | · |
| If amending the registered agent and/or reg | gistered office address | in Florida, enter the nam | e of the |
| new registered agent and/or the new register | ered office address: | | |
| Name of New Registered Agent: | | | |
| Trame of their Registered rigent. | | | |
| - | | T.1. \ | |
| New Registered Office Address: | (Florida street | address) | |
| | | , Florida_ | |
| | (City) | (Zip Code) | |
| w Registered Agent's Signature, if changing | Registered Agent: | | |
| ereby accept the appointment as registered age | | and accept the obligations | s of the position. |
| | | | |
| Sio | nature of New Register | ed 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)

| Title (| Name / ~ | Address | Type of Action |
|-------------|---|--------------------------------|---------------------|
| VP | John J. Reisen | OUTNW6thAVE | Add Add |
| V # 5 | OUII) OF HUSE | Fort-Lauderdales | Remove |
| | | Florida 33311 | <u> </u> |
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| | ing or adding additional Articles, enter ditional sheets, if necessary). (Be specified) | | |
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| | nendment provides for an exchange, rec | | |
| | ons for implementing the amendment if | not contained in the amendment | itself: |
| (ij ne | ot applicable, indicate N/A) | | |
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| The date of each amendment(| s) adoption: [0-5-10 |
|---|--|
| | (date of adoption is required) |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/wer by the shareholders was/we | 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 d for each voting group entitled to vote separately on the amendment(s): |
| "The number of votes of | east for the amendment(s) was/were sufficient for approval |
| by | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | (voting group) |
| The amendment(s) was/wer action was not required. | e adopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/wer action was not required. | e adopted by the incorporators without shareholder action and shareholder |
| Dated <u>O</u> | Holer 5,2010 Sco |
| Signature | a director, president or other officer – if directors or officers have not been |
| | cted, by an incorporator – if in the hands of a receiver, trustee, or other court |
| | binted fiduciary by that fiduciary) |
| | Michael J. Delasquale Jr. |
| | (Typed or printed name of person signing) |
| | (Title of person signing) |