(Requestor's Name)	
(Address)	2002370709
(Address)	200207070
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	07/03/120102800
(Business Entity Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: S+G Corperation of Tallahassee DOCUMENT NUMBER: P1000082370
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Stanley Feener Name of Contact Person St. G. Corperation of Tallahassee Firm/ Company 4736 May for RL Address Tallahassee Fl. 32308 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Stanley Feener at (850) 4/4/5 3827 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

to

	Articles of Incorporation	, LED
	of	12 JUL -9 PM 1:51
S+G corperat	107 of Tallaha.	ssee It is
(Name of Corporation as curr	ently filed with the Florida Dept. of S	tate) PALLEAMARY OF STATE
00001P	0082370	SCE STORE DRY OF STATE TAILEAN ASSEE, PLORIO
(Document Nur	mber of Corporation (if known)	
arsuant to the provisions of section 607.1006, Articles of Incorporation:	, Florida Statutes, this Florida Profit Co	rporation adopts the following amendment
. If amending name, enter the new name o	of the corporation:	
		The new
ame must be distinguishable and contain to Corp.," "Inc.," or Co.," or the designation ord "chartered," "professional association,"	"Corp," "Inc," or "Co". A profession	or "incorporated" or the abbreviation on all corporation name must contain the
Enter new principal office address, if apprincipal office address MUST BE A STREE		
rincipal office gaaress MUST BE A STREE	<u> </u>	
Enter new mailing address, if applicable		•
(Mailing address <u>MAY BE A POST OFF</u>	<u> </u>	
If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Florida, e	nter the name of the
new registered agent and/or the new reg	distered office address.	
Name of New Registered Agent		
·		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if chang hereby accept the appointment as registered	ing Registered Agent:	he obligations of the position
rereby accept the appointment as registered	адет. Тат затишт мин ана ассерт	ne congunous of the position.
Signati	ure of New Registered Agent, if changin	g

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change X Add Remove	P	Stanley Feen	1736 Maylor Rd Tollahassee Fl 3230
2) Change Add Remove		•	
3) Change Add Remove	<u>. —</u>		
4) Change Add Remove		·	
5) Change Add Remove			
6) Change Add Remove			

Milach additional she	ets, if necessary). (Be <u>specific)</u> [-00 M//	- as a	ddition	al ann	المعادي
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provisions for imple	ovides for an exchan	ige, reciassification ment if not contain	i, or cancenado ied in the amen	dment itself:		
(if not applicable	e, indicate N/A)					
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he date of each amendment(s) ac	doption: 1-9-12
ffective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
doption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statement each 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	, , , , , , , , , , , , , , , , , , , ,
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated 7	9 12
Signature(By a di	Janly Jeens irector, president or other officer – if directors or officers have not been
	d, by an incorporator - if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	Stanley Feener (Typed or printed name of person signing)
	(Typed or prifited name of person signing)
•	Tresdey T
	(Title of person signing)