P10000082816

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SECRETARY OF STATE
TALLAHASSEE FROME

Roberts DEC 1 0:2010

COVER LETTER

Division of Corporations	•			
NAME OF CORPORATION:	rt Zone, Inc			
DOCUMENT NUMBER: P10000	082816			
The enclosed Articles of Amendment and fee are sub	omitted for filing.			
Please return all correspondence concerning this matter to the following:				
Name of	KATZEN FContact Person			
Firm	n/ Company			
15090 SI	N 40 St. Address			
City/ State and Zip Code				
E-mail address: (to be used for fi	Iture annual report notification)			
For further information concerning this matter, please	_			
Name of Contact Person	at (954) 260 - 2663 Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made p	ayable to the Florida Department of State:			
\$35 Filing Fee \$3.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
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			
"\"\"	Fallahassee, FL 32301			

TALLAHASSEE, FLORIDA **Articles of Amendment** to **Articles of Incorporation** (Name of Corporation (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following

		"company," or "incorporated", "," or "Co". A professional corpo
ne must contain the word "chartered," "pro		
Enter new principal office address, if app		
incipal office address <u>MUST BE A STREE</u>	T ADDRESS)	

		······································
Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFI</u>	LE BUX)	
		
		
If amending the registered agent and/or r		n Florida, enter the name of the
If amending the registered agent and/or r new registered agent and/or the new regis		n Florida, enter the name of the
		n Florida, enter the name of the
new registered agent and/or the new regis	stered office address:	
new registered agent and/or the new regis		
new registered agent and/or the new regis Name of New Registered Agent:	stered office address:	

Signature of New Registered 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 VP	<u>Denise Hughes</u>	Address 2900 SW 156 th Av Avic, FC 33331	Type of Action Add Remove
	<u></u>		
	ling or adding additional Articles, ento Iditional sheets, if necessary). (Be spe		
provisio	nendment provides for an exchange, rooms for implementing the amendment in ot applicable, indicate N/A)		

The date of each amendment(s) adoption:	12-01-10		
(date of adoption is required)		
Effective date if applicable: $[2-5]-[0]$ (no more than 90 days after amendment file date)			
(110 11101 0 11101 1 1 1 1 1 1 1 1 1 1 1			
Adoption of Amendment(s) (CHEC	K ONE)		
The amendment(s) was/were adopted by the shareholders was/were sufficient for appropriate the shareholders was/were sufficient for appropriate the shareholders was/were sufficient for approximation and the shareholders was	areholders. The number of votes cast for the amendment(s) roval.		
	nareholders through voting groups. The following statemen oup entitled to vote separately on the amendment(s):		
"The number of votes cast for the amendment	ent(s) was/were sufficient for approval		
by	"		
by(voting group)			
The amendment(s) was/were adopted by the boa action was not required.	ard of directors without shareholder action and shareholder		
The amendment(s) was/were adopted by the incaction was not required.	orporators without shareholder action and shareholder		
Dated 12-01-10			
	or other officer – if directors or officers have not been ator – if in the hands of a receiver, trustee, or other court		
	or printed name of person signing) (C.S. prop. signing)		
(1 itle of pe	rson signing)		