

P10000100633

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

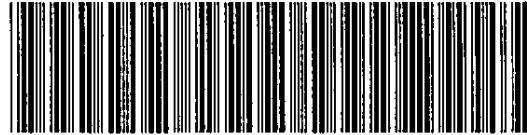
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700237723077

07/25/12--01003--028 \*\*35.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUL 25 PM 12:59

N/C

JUL 26 2012

T. BROWN

Law Offices of  
DiVito & Higham, P. A.

JOHN J. DI VITO (1928-2005)  
FREDERICK A. HIGHAM, JR.  
JOSEPH A. DI VITO  
PETER J. VASTI

4514 CENTRAL AVENUE  
ST. PETERSBURG, FLORIDA 33711-1041  
(727) 321-1201  
FAX (727) 321-5181

July 23, 2012

Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Re: Name Change from The Massage Spa, Inc. to Pride T-Shirts, Inc.  
Document Number: P10000100633

Dear Sir/Madam:

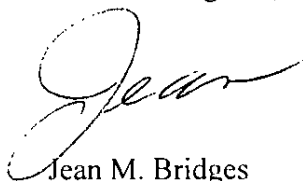
Enclosed please find the original:

- 1) Cover Letter
- 2) Articles of Amendment to Articles of Incorporation of The Massage Spa, Inc.  
for name change to Pride T-Shirts, Inc.
- 3) Our client's check in the amount of \$35.00 for the filing of same

Thank you for your assistance in this matter. Should you have any questions, please do not  
hesitate to contact our office.

Very truly yours,

DiVito & Higham, P.A.



Jean M. Bridges  
Legal Assistant to  
Joseph A. DiVito, Esq.

Encl:

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** The Massage Spa, Inc.  
**DOCUMENT NUMBER:** P10000100633

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dianne C. Boulay  
Name of Contact Person  
Firm/ Company  
4101 Central Avenue  
Address  
St. Petersburg, FL 33713  
City/ State and Zip Code  
prideshirts@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dianne C. Boulay at ( 727 ) 434-0768  
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:

- |                                                     |                                                                        |                                                                                                     |                                                                                                                            |
|-----------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>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  
Articles of Incorporation  
of

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUL 25 PM 12:59

The Massage Spa, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P10000100633

(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:**

Pride T-Shirts, Inc.

The new

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)

N/A

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

N/A

**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

N/A

(Florida street address)

New Registered Office Address:

N/A

, 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.

N/A

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)*

*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:**

|                 |           |                    |
|-----------------|-----------|--------------------|
| <u>X</u> Change | <u>PT</u> | <u>John Doe</u>    |
| <u>X</u> Remove | <u>V</u>  | <u>Mike Jones</u>  |
| <u>X</u> Add    | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u><br>(Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|--------------------------------------|--------------|-------------|----------------|
| 1) <u>Change</u>                     | <u>N/A</u>   | _____       | _____          |
| <u>Add</u>                           |              | _____       | _____          |
| <u>Remove</u>                        |              | _____       | _____          |
| 2) <u>Change</u>                     | <u>N/A</u>   | _____       | _____          |
| <u>Add</u>                           |              | _____       | _____          |
| <u>Remove</u>                        |              | _____       | _____          |
| 3) <u>Change</u>                     | <u>N/A</u>   | _____       | _____          |
| <u>Add</u>                           |              | _____       | _____          |
| <u>Remove</u>                        |              | _____       | _____          |
| 4) <u>Change</u>                     | <u>N/A</u>   | _____       | _____          |
| <u>Add</u>                           |              | _____       | _____          |
| <u>Remove</u>                        |              | _____       | _____          |
| 5) <u>Change</u>                     | <u>N/A</u>   | _____       | _____          |
| <u>Add</u>                           |              | _____       | _____          |
| <u>Remove</u>                        |              | _____       | _____          |
| 6) <u>Change</u>                     | <u>N/A</u>   | _____       | _____          |
| <u>Add</u>                           |              | _____       | _____          |
| <u>Remove</u>                        |              | _____       | _____          |

**E. If amending or adding additional Articles, enter change(s) here:**

*(Attach additional sheets, if necessary). (Be specific)*

N/A

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

*(if not applicable, indicate N/A)*

N/A

The date of each amendment(s) adoption: July 16, 2012

Effective date if applicable: N/A  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)

- ☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 7-20-12

Signature Dianne C. Boulay  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Dianne C. Boulay  
(Typed or printed name of person signing)

Director  
(Title of person signing)