P1000102358

(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



100201997571

04/19/11---01030---007 **35.00

11 MAY 18 PH 2: 4!

SECRETARY OF STAIL
ASION OF CORPORATIONS

Amend Manue Chs Massille

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	Josy Enterprises, Inc	<u>. </u>
DOCUMENT NU	JMBER:	P10000102358	
The enclosed Artic	cles of Amendment and fee	are submitted for filing.	
Please return all ed	orrespondence concerning th	is matter to the following:	
	Alexander Socia		
	ſ	Name of Contact Person	
Law Office of Alexander Socia, P.A.			
	Firm/ Company		
	3650 N Federal Hwy, Ste 217		
	Address		
	Lighthouse Point, FL 33064		
	City/ State and Zip Code		
	E-mail address: (to be use	Dalexsocia.com d for future annual report notification)	
For further informa	ntion concerning this matter,	please call:	
A	lexander Socia	at (<u>954</u>) <u>3</u> Area Code & Daytime Tel	66-5256
Name	of Contact Person	Area Code & Daytime Tel	lephone Number
Enclosed is a check	t for the following amount n	nade payable to the Florida Depar	tment of State:
☑ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status 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 Circl	e

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 21, 2011

ALEXANDER SOCIA LAW OFFICE OF ALEXANDER SOCIA, P.A. 3650 N. FEDERAL HWY - STE. 217 LIGHTHOUSE POINT, FL 33064

SUBJECT: JOSY ENTERPRISES, INC.

Ref. Number: P10000102358

We have received your document for JOSY ENTERPRISES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 111A00009672

HECEIVED

11 MAY 16 AM 10: 50

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Articles of Amendment to Articles of Incorporation of

Josy Enterprises, Inc.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P1000102358	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopted mendment(s) to its Articles of Incorporation:	pts the following
A. If amending name, enter the new name of the corporation:	
Josy Enterprises II, Inc.	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporate abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional co- name must contain the word "chartered," "professional association," or the abbreviation "P.A."	d" or the orporation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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:	FILED STAILERS STAIL SE
Name of New Registered Agent:	
New Registered Office Address: (Florida street address)	
(City) (Zip Code)	 -
New Registered Agent's Signature, if changing Registered Agent: The hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the Signature of New Registered Agent, if changing	position.

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>	Address	Type of Action
OPVST	Josette Lucius	4400 N Federal Hwy Ste 52 Boca Raton, FL 33431	
	ing or adding additional Articles, en ditional sheets, if necessary). (Be sp		
provisio	nendment provides for an exchange, instance of implementing the amendment of applicable, indicate N/A)	reclassification, or cancellation of if not contained in the amendme	issued shares, nt itself:

The date of each emendment(s) adoption: 4-5-2011				
•	(date of adoption is required)			
Effective date if applicable: (no	more than 90 days after amendment file date)			
(****				
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
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) (flicient for approval.			
	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 east f	or the amendment(s) was/were sufficient for approval			
by	ng group)			
(voti	ng group)			
The amendment(s) was/were addaction was not required.	opted by the board of directors without shareholder action and shareholder			
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder			
Dated4_5.				
	ector, presidenter other officer – if directors or officers have not been			
	by an incorporator—if in the hands of a receiver, trustee, or other court. I fiduciary by that fiduciary)			
/	(Typed or printed name of person signing)			
	President (Title of person signing)			