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Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Paramount Signature Services, Inc.
DOCUMENT NUMBER: P 1/0000 13337
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
VICTORIA L. RUIZ
Name of Contact Person
paramount signatureservices Inc
Firm/ Company
1936 Bruce B. DOWN J BIVD #217
Address
Wesley Chapel FL 33543
City/ State and Zip Code
info@paramountsignatures.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
VILISCRIA KUIT at (813) 451 1655
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 Scrifficate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Clifton Building 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

Parailant S	ignature Services, Inc.
(Name of Corporation as curr	ently filed with the Florida Dept. of State)
5651000119	7
(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	06, Florida Statutes, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of	of the corporation: M/C
	The new
abbreviation "Corp.," "Inc.," or Co.," or the	the word "corporation," "company," or "incorporated" or the e designation "Corp," "Inc," or "Co". A professional corporation of the abbreviation "P.A."
B. Enter new principal office address, if app	olicable: 1934 Bruce B Down BIVO #217
(Principal office address <u>MUST BE A STRE</u> )	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)	CE BOX)
D. If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Florida, enter the name of the
new registered agent and/or the new reg	The state of the s
Name of New Registered Agent:	VICTORIA L. RUIT
	1936 Bruce & DUMNJBIVOHZI7.
New Registered Office Address:	(Florida street address)
	Wesley Chapel , Florida 33543
	(City) (Zip Code)
New Registered Agent's Signature, if change	ing Registered Agent:

Signature of New Registered Agent, if changing

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the 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>	Name	Address	Type of Action
7	Alison Walter	7080 High Corner Rd	
P	Victoria Pruiz	1934 Bruce B Downs Bl Wesley Chapel Fl3354	√d #217 Add B□ Remove
			☐ Add ☐ Remove
	ling or adding additional Articles, enter dditional sheets, if necessary). (Be specif		
No			
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provisio	nendment provides for an exchange, recloss for implementing the amendment if a pot applicable, indicate N/A)		

The date of each amendment(s) adoption: 4 19 3011
Effective date if applicable: 4 9 20 (date of adoption is required)
(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 4 5 11
Signature
(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)
(Typed or printed name of person signing)
TosiQont Townson atom (Title of person signing)