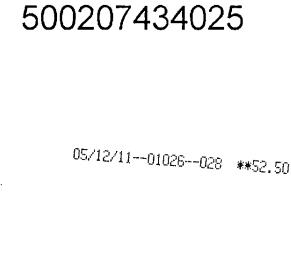
(Requestor's Name)	
(Address)	5002074340
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	05/12/1101026(
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	A ASS
Special Instructions to Filing Officer:	TOWN SOLE PROPERTY.

Office Use Only







COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION:	A + Bail Bonds, Inc	·
. DOCUMENT NUM	1BER:	P11000016620)
The enclosed Article	es of Amendment and fee a	e submitted for filing.	
Please return all corr	respondence concerning th	s matter to the following:	
		umberto Moreno	
	N	ame of Contact Person	
	Α	Bail Bonds, Inc.	
		Firm/ Company	
	110	5 US Hwy 17 South	····
		Address	
		artow, FL 33830	
	C	ty/ State and Zip Code	
	aplusbailb E-mail address: (to be use	onds24@gmail.com for future annual report notification)	
For further informati	ion concerning this matter,	please call:	
Hun	nberto Moreno	at (863)	534-1111
Name of	f Contact Person	Area Code & Daytime To	elephone Number
Enclosed is a check t	for the following amount n	ade payable to the Florida Depa	artment of State:
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	✓ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Add	Iress	Street Address	
Amendment		Amendment Section	
Division of C	-	Division of Corporations	
P.O. Box 632		Clifton Building	_1_
Tallahassee, l	FL 32314	2661 Executive Center Circ	cie

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation	College College
of	See My See
	4780 2
 A + Bail Bonds, Inc.	1 PH/2
(Name of Corporation as currently filed with the Florida Dept. of State)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
P11000016620	
(Document Number of Corporation (if known)	

lowing

	N/A	The n
ame must be distinguishable and conta bbreviation "Corp.," "Inc.," or Co.," or ame must contain the word "chartered," '	the designation "Corp," "In	c," or "Co". A professional corporat
B. Enter new principal office address, if Principal office address MUST BE A STR		
Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
(Mailing address MAY BE A POST OF	or registered office address	in Florida, enter the name of the
(Mailing address MAY BE A POST OF). If amending the registered agent and/ new registered agent and/or the new r	or registered office address:	in Florida, enter the name of the
(Mailing address MAY BE A POST OF	or registered office address	in Florida, enter the name of the
(Mailing address MAY BE A POST OF). If amending the registered agent and/ new registered agent and/or the new r	or registered office address:	
(Mailing address MAY BE A POST OF). If amending the registered agent and/ new registered agent and/or the new registered agent and/or the new registered Agent:	or registered office address registered office address: N/A	

Signature of New Registered Agent, if changing

The date of each amendmen	$t(s)$ adoption: $\frac{4}{}$	/29/2011
Effective date <u>if applicable</u> :	4/29/2011	(date of adoption is required)
	(no more than	90 days after amendment file date)
Adoption of Amendment(s)	(<u>C</u>)	HECK ONE)
The amendment(s) was/we by the shareholders was/w		e shareholders. The number of votes cast for the amendment(s) approval.
		the shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):
"The number of votes	cast for the ame	ndment(s) was/were sufficient for approval
by		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the	e board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the	e incorporators without shareholder action and shareholder
Dated 4/29	/2011	
Signature	M	
(By		dent or other officer - if directors or officers have not been
	•	rporator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		Humberto Moreno
	(Ty	ped or printed name of person signing)
		President
	(Title o	of person signing)

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
Tres	Jeffrey Vassallo	1809 Braman Blvd FT. Meyers, FL 33901	
Miles and Miles and Apple			Print
			
	ling or adding additional Article distinct sheets, if necessary). (
<u>provisio</u>		nge, reclassification, or cancellation o ment if not contained in the amendme	
*			