# P11000035900

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
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FALLAHASSEE, FIRSHE

Amend TBrown 10-24-11

#### **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORP	ORATION:	Nodarse & Associates, In	nc.
DOCUMENT NU	MBER:	P11000035900	<del> </del>
The enclosed Articl	es of Amendment and fee	are submitted for filing.	
Please return all con	respondence concerning t	his matter to the following:	
<u>-</u>		Barbara Boerner	
		Name of Contact Person	
_	Ter	racon Consultants, Inc.	
		Firm/ Company	
18001 W. 106th St., Suite 300			
		Address	
_		Olathe, KS 66061	
-		City/ State and Zip Code	
	blboer E-mail address: (to be u	ner@terracon.com sed for future annual report notification)	
For further informat	tion concerning this matte	r, please call:	
Ba	rbara Boerner	at ( 913 ) 599-68	
Name o	of Contact Person	Area Code & Daytime Tele	phone Number
Enclosed is a check	for the following amount	made payable to the Florida Departi	ment of State:
<b>☑</b> \$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 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**

Articles of Incorporation of	2011 OCT ED
Nodarse & Associates, Inc.	TALLASTAN AM SO
(Name of Corporation as currently filed with the Florida Dept. of State) P11000035900	MASSEE, ESTAT.
(Document Number of Corporation (if known)	— CORIDA

	nber of Corporation (if known	wn)
Pursuant to the provisions of section 607.1000 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this F	lorida Profit Corporation adopts the follo
A. If amending name, enter the new name of	the corporation:	
		The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Corp," "Inc	c," or "Co". A professional corporation
B. Enter new principal office address, if app		
(Principal office address <u>MUST BE A STREE</u>	<u> </u>	t yang yang gang ang ang ang ang ang ang ang ang
C. Enter new mailing address, if applicables (Mailing address MAY BE A POST OFFICE)		
D. If amending the registered agent and/or r new registered agent and/or the new regis		n Florida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street d	address)
	(Q1)	, Florida
•	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a		and accept the obligations of the position.
	ionature of New Registere	d 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
Pres	Leila J. Nodarse	1675 Lee Road Winter Park, FL 32789	_ ☑ Add _ □ Remove
DP	M. Gayle Packer	18001 W. 106th St., Suite 300 Olathe, KS 66061	_ ☐ Add _ ☑ Remove
<u>Sec</u>	M. Gayle Packer	18001 W. 106th St., Suite 300 Olathe, KS 66061	- ☑ Add ☐ Remove
	ding or adding additional Articles, educational sheets, if necessary). (Be s	enter change(s) here:	
provisi		, reclassification, or cancellation of issets if not contained in the amendment	

## 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 she'ets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
Dir	Jamal Najm	2855 Premiere Parkway, Suite C Duluth, GA 30097	☑ Add ☐ Remove
***************************************			☐ Add ☐ Remove
		<u> </u>	☐ Add ☐ Remove
(attach ad	dditional sheets, if necessary). (B	e specific)	
provisio	nendment provides for an exchanons for implementing the amendmot applicable, indicate N/A)	ge, reclassification, or cancellation of issuent if not contained in the amendment it	ued shares, self:

The date of each amendment	
Effective date <u>if applicable</u> : '	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement of 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)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
action was not required.	
Dated 10-1	
Signature	ny love face
(By	a director, president or other officer - if directors or officers have not been
	ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	M. Gayle Packer
	(Typed or printed name of person signing)
	Secretary
	(Title of person signing)