## 11000037744

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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12/05/11--01022--004 \*\*35.00

Amend TBrown 12-6-11

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: Consumer Rights	Solutions Inc.	
DOCUMENT NUMBI	ER: P11000037744		
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	atter to the following:	
		NONSANT ame of Contact Person	
	140	and of Confact Ferson	
		Firm/ Company	
	P.O. F	3OX 121567 Address	<del> </del>
	CLERMONT	r, FLORIDA 34711	
		ty/ State and Zip Code	
	mnonsant@gmail.com E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
Mark Nonsant		at (_407	) 716-1950
	Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	eartment 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)
	ng Address adment Section	Amend	Address dment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



Consumer Rights Solutions Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P11000037744 (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: N/A 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) P.O. BOX 121567 CLERMONT, FLORIDA 34711 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<u>N/A</u> (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, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	Name	<u>Ad</u>	dress	
1) <u>P</u>	MARK NONSANT	P.O CLI	. BOX 121567 ERMONT, FLORIDA 34711	•
2)				
3)				·
4)		<u></u>		
5)	<del></del>			
6)				
<u>if REMOVI</u>	NG an officer and/or director, please	list the title(s) and na	me of the officer/director to be remove	<u>d:</u>
Title(s)	Name	Title(s)	Name	
1) <u>P</u>	JASMAN NECENCE	4)		
2) <u>VP</u>	MARK NONSANT	5)		
3)		6)		

E. If amending or adding additional Arti (attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
. · · · · · · · · · · · · · · · · · · ·	
<u> </u>	
· · · · · · · · · · · · · · · · · · ·	

<ul> <li>If an amendm provisions for</li> </ul>	ent provides for an exchange, reclassification, or cancellation of issued shares.  implementing the amendment if not contained in the amendment itself:
(if not appl	licable, indicate N/A)
<del> </del>	
he date of each a	mendment(s) adoption: 12/1/2011
ffective date if a	pplicable: _12/1/2011
incenve date <u>ir al</u>	(no more than 90 days after amendment file date)
doption of Amen	odmont/s\ (CUECK ONE\
aoption of Amer	ndment(s) ( <u>CHECK ONE</u> )
	t(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s)
by the sharehold	ders was/were sufficient for approval.
The amendment	((s) was/were approved by the shareholders through voting groups. The following statement
	tely provided for each voting group entitled to vote separately on the amendment(s):
week 1	
	ber of votes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
	(s) was/were adopted by the board of directors without shareholder action and shareholder
action was not re	equired.
	(s) was/were adopted by the incorporators without shareholder action and shareholder
action was not re	equired.
1**	Dated 12/1/2011
1.	yaled 12/1/2011
c	innoting 1/21/1/
3	(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)
	MARK NONSANT
	(Typed or printed name of person signing)
	DDECIDENT
	PRESIDENT (Title of person signing)
	CLIDE OF BELOW WELLING

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