## P11000038312

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:
DOCUMENT NUMBER: P 11 0000 38312
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
GEORGE F., SMITH, PRES  Name of Contact Person
SAXER - SMITH INC.
Firm/ Company
Firm/ Company  1/029 SANDTRAP DR.  Address  PORT RICHEY FL. 34668  City/ State and Zip Code
Address
FORT KICHEY, FL. 34668
Cîty/ State and Zip Code
TUDU GEORGES (Q) TOMANDON DA COM
JUDY GEORGES (a) TAMPA BAY. RR. COM  B-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
GECRGE F. Sm.TH       at (727) 378 - 5160         Name of Contact Person       Area Code & Daytime Telephone Number
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 Certificate of Status  \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & 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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 12, 2011

George F. Smith Saxer-Smith, Inc. 11029 Sandtrap Dr. Port Richey, FL 34668

SUBJECT: SAXER-SMITH,INC Ref. Number: P11000038312

We have received your document for SAXER-SMITH,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 amendment that you sent in is incomplete. Page 1, 3 and 4 of the amendment form are missing. I have enclosed those pages for you to fill out and return to us when you resubmit the entire 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) 245-6907.

Annette Ramsey Regulatory Specialist II

Letter Number: 911A00027603

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## **Articles of Amendment** to

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•	Articles of Incorporatio	n		DH 0-1
	of	,	2011 DEC 19	rn 35 i
SAXER- SN	n,TH.	/NC	SECRETARY	OF STAT
(Name of Corporation as curren	itly filed with the Florid	a Dept. of State)	TALLAHASSE	E, FLORII
P 11 0000			y.	
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<del></del>
(Document Numb	per of Corporation (if kno	wn)		
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	, Florida Statutes, this I	lorida Profit Corp	oration adopts the	following
A. If amending name, enter the new name of t	the corporation:			
N·/a				
The new name must be distinguishable and conto	air the word Commonsta	n 22 Canamaran 22 an	"incomparated" or	tha
The new name must be assinguishable and cont abbreviation "Corp.," "Inc.," or Co.," or the a name must contain the word "chartered," "profe	designation "Corp," "Inc	c," or "Co". A pro	ofessional corporat	tion
B. Enter new principal office address, if appli-	cable:	NIA		
(Principal office address MUST BE A STREET				
	_			
				_
C. Enter new mailing address, if applicable:		11/2		
(Mailing address <u>MAY BE A POST OFFIC</u>	<u>E BOX</u> )	<i>N   H</i>		_
•				<del></del>
D. If amonding the projetened agent and/on re-	cistored office address i	n Florida, onton the	a nama of the	
D. If amending the registered agent and/or renew registered agent and/or the new regist		n riorida, enter the	e name or the	
	/			
Name of New Registered Agent:	N/A		<del>,</del>	
	,			
<del></del>	(Florida street ad	dress)	<del></del>	
	(	,		
New Registered Office Address:	/C!: .	, Flo	orida(Zip Code)	<del></del>
	(City)		(Zip Coae)	
			•	
New Registered Agent's Signature, if changing				
I hereby accept the appointment as registered ag	ent. I am familiar with a	nd accept the obliga	ations of the positio	n,
<b>→</b>				

Signature of New Registered Agent, if changing

SAXER-SMITH INC P110000 38312

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) If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed: IN. PRES CHRISTINE A. SAXER 4) CHRISTINE A SAXER 5)

E. If amending or adding additional Art (attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
N	A
	/ A
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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
(y not applicable, material 1971)
N/A
1
The date of each amendment(s) adoption: 12-1-11
Effective date <u>if applicable</u> :  (no more than 90 days after amendment file date)
(no more than 90 days after amenament file date)
doption 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. <i>The following statement</i>
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)
(Voling 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.
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I WANT Thisrach.
Signature / /V / / / / / / / / / / / / / / / / /
(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)
GEORGE P Smith
(Typed or printed name of person signing)
(1) ped of printed name of person signing)
PRESIDENT TREASURER SHAREHOL
(Title of newson gioming)