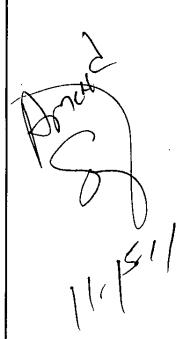


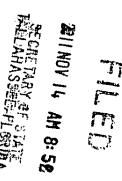
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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Street Address Mailing Address Amendment Section** Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

	es of Ameno to s of Incorpo of \(\frac{1}{4}\)		Composite Manager
- Poardwal	of Incorpo of LA(a	oration	ALINON / ED
Poardwal	or K7ra	and in a	Nov. Co
(Name of Corporation as current	K 7(a ly filed with	200	
(Name of Corporation as current	ly filed with		COM ORNAL A
		the Florida Dent-o	(State)
41.17	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	0.00	
(Document Numbe	r of Corporat	ion (if known)	
Pursuant to the provisions of section 607.1006, following amendment(s) to its Articles of Incorporate		tes, this <i>Florida Pr</i>	rofit Corporation adopts the
A. If amending name, enter the new name of th	e corporatio	<u>n:</u>	
The new name must be distinguishable and "incorporated" or the abbreviation "Corp.," "I "Co". A professional corporation name association," or the abbreviation "P.A."	nc.," or Co	," or the designation	on "Corp," "Inc," or
B. <u>Enter new principal office address, if applic</u> (<i>Principal office address <u>MUST BE A STREET A</u></i>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)		
D. If amending the registered agent and/or reg new registered agent and/or the new registe Name of New Registered Agent:			, enter the name of the
	(Flor	ida street address)	
TOW MEASURE OF OTHER MARKETS.	(1.10)	sii eei uudi ess)	
		(City)	, Florida (Zip Code)
		(Cuy)	(Lip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a position.			accept the obligations of the
Sigr	ature of New	Registered Agent, ij	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)	<u>Name</u>		Address	
1) Vice Presiden	of Laureen f	bratt 18	Homestean	ad d. Florida
2)	<u></u>			
3)	•			
4)				
5)				
6)				
If REMOVING an off removed:	icer and/or director, plea	se list the title(s) an	nd name of the officer/	director to be
Title(s)	<u>Name</u>	Title(s)	<u>Name</u>	
1)		4)		
2)		5)		
3)		6)		

. If amending or adding additional A	articles, enter change(s) here
(attach additional sheets, if necessary).	(Be specific)
	-
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· · · · · · · · · · · · · · · · · · ·	
provisions for implementing the am	schange, reclassification, or cancellation of issued shares sendment if not contained in the amendment itself:
If an amendment provides for an exprovisions for implementing the am (if not applicable, indicate N/A)	schange, reclassification, or cancellation of issued shares tendment if not contained in the amendment itself:
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provisions for implementing the am	schange, reclassification, or cancellation of issued shares tendment if not contained in the amendment itself:

The date of each amendment(s) adoption:
Effective date if applicable: A SA (date of adoption - required)
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
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"
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
Signature Paul Dom
(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)
(Title of person signing)