

P110000060695

(Requestor's Name)

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(City/State/Zip/Phone #)

☐

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(Business Entity Name)

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2011 OCT 19 AM 11:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Amend

TBrown 10-20-11

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: FLIP-HER PRODUCTIONS INC.

DOCUMENT NUMBER: P11000060695

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

NANCY LA ULSTA  
Name of Contact Person

FLIP-HER PRODUCTIONS INC.  
Firm/ Company

800 OCEAN DR #201  
Address

Juno Beach FL 33408  
City/ State and Zip Code

MARKSCHWARTZANI@HOTMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARY SCHWARTZ at ( 917 ) 691 4046  
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

☐ \$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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 11, 2011

NANCY LA VISTA  
FLIP-HER PRODUCTIONS, INC.  
800 OCEAN DR #201  
JUNO BEACH, FL 33408

SUBJECT: FLIP-HER PRODUCTIONS, INC.  
Ref. Number: P11000060695

We have received your document for FLIP-HER PRODUCTIONS, 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):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6925.

Teresa Brown  
Regulatory Specialist II

Letter Number: 911A00023336

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P11000060695

Page 1 of 3

**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>	<u>Type of Action</u>
Pres	NANCY LA VISTA	800 Ocean Dr #201 Juno Bch FL 33408	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Pres.	MARK SCHWARTZ	800 Ocean Dr #201 Juno Bch FL 33408	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Vice Pres Sec/Treas	NANCY LA VISTA	800 Ocean Dr #201 Juno Bch FL 33408	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**

*(attach additional sheets, if necessary). (Be specific)*

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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)*

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The date of each amendment(s) adoption: 10-15-11  
(date of adoption is required)

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**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 \_\_\_\_\_"  
(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 10/15/11

Signature Nancy La Vista  
(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)

NANCY LA VISTA  
(Typed or printed name of person signing)

Vice President  
(Title of person signing)