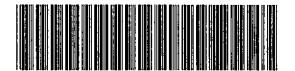
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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE

DEC 1 4 2012

T. BROWN

COVER LETTER

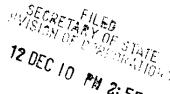
TO: Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: 22 SECOND INC DOCUMENT NUMBER: ID. E 893515 / P11 0000300007
The enclosed <i>Articles of Amendment</i> and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
rease retain an correspondence concerning and maker to the following.
FULLIA ARIENTI
Name of Contact Person
22 SECOND INC Firm/Company
2021 IST AVENUE N Address
ST PETERSRUPY FI 32713
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
FULVIA ARIENTI 11,727, 612 5409
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:
S35 Filing Fee Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status (Additional Copy is enclosed)
Mailing Address Street 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



22 SECOND INC.	Z: 55
(Name of Corporation as currently filed with the	Florida Dept. of State)
	Tional Sept. of Suit.
P 1 0000 7878 9 (Document Number of Corporation	(if known)
(Document Nation of Corporation	(ii kilowii)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered." "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, if applicable:	200 MIRROR LAKE DR K
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	ST PETERSBURG
	FLORIDA 33701
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	200 HIRROR LAKE DRN
	ST. PETERSBURG.
	FLORIDA 33701
D. If amending the registered agent and/or registered office ad-	
new registered agent and/or the new registered office addre	<u>ss:</u>
Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address:	, Florida
(Cit	(Zip Code)
N. D. C. L. M. C. L. M. C. L. D. C. L. D. C. L.	
New Registered Agent's Signature, if changing Registered Ager I hereby accept the appointment as registered agent. I am familia	
Signatura of Nove Registeres	A 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)

7.

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>John D</u>	<u>loc</u>	
X Remove	<u>V</u> Mike J	ones	
_X Add	SV Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	PERCY MARGARET	4720 DR HARTIN WHELK
Add Remove			ST. PETERSBURG.
2) Change Add	<u>VP</u>	ARIENTI FULLIA	4720 Dr MARTIN LUTHER KING, 8T. PETERSBURG. T
Remove 3) Change Add	SEC	PERCY MARGARET	FLORIDA 33705. 4770 DE MLK. JU ST.S.
Remove 4) Change Add	<u>SEC</u>	ARIENTI FULLIA	FLORIDA 33705. 4720 Dr MLK Jr St. S. FLORIDA 33705.
Remove 5) Change Add			
Remove 6) Change Add Remove			
K #111() ('P			

•	cles, enter change(s) her (Be specific)		
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If an amendment provides for an exch	ange, reclassification, o	r cancellation of issued sha in the amendment itself:	res,
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, on the name of the	r cancellation of issued sha in the amendment itself:	res.
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provisions for implementing the amer	ange, reclassification, on the notion of the	r cancellation of issued sha in the amendment itself:	res,

The date of each amendment(s) ac	$\frac{12.5.2}{12.5}$
Effective date <u>if applicable</u> :	12/5/12
•	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cast	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	opted by the incorporators without shareholder action and shareholder
DatedSignature	director, president or other officer in directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court
	ned fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	PRESIDENT (Title of person signing)