# P11000082743

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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### **COVER LETTER**

TO: Amendment Section . ** Division of Corporations		
NAME OF CORPORATION: Supe	rior Vending Serv	i'us Inc
DOCUMENT NUMBER: P//	0000 82 743	
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning to	his matter to the following:	
Jerm	191're Johnson	
•	Name of Contact Person	
	NA	
	Firm/ Company	<del></del>
370 crest	4 WARD (1) # 206	·
	Addiess	
CIB A	734/1	
	City/ State and Zip Code	
Service 37	the vendingguys.  sed for future annual report hotification)	ne+
E-mail address: (to be us	sed for future annual report notification)	······································
For further information concerning this matter	r, please call:	
Termeine Johnson	·	18 Jose
Name of Contact Person	Area Code & Daytime Tcl	
Enclosed is a check for the following amount	made payable to the Florida Depar	tment of State:
\$55 Filing Fee \$\times \text{Certificate of Status}\$	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy
T THE		(Additional Copy is enclosed)
Amendment Section	Street Address Amendment Section	
Division of Erporations	Division of Corporations	
P.O. Box 632 <del>7</del> Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circl	ę
	Tallahassee, FL 32301	



November 2, 2011

JERMAINE JOHNSON 330 CRESTWOOD CIRCLE #206 ROYAL PALM BEACH, FL 33411

SUBJECT: SUPERIOR VENDING SERVICES INC

Ref. Number: P11000082743

We have received your document for SUPERIOR VENDING SERVICES 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P11000047112 - VENDING GUYS INC..

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 711A00024891

#### **Articles of Amendment**

to

#### **Articles of Incorporation**

01	
Superior Vending Se (Name of Corporation as currently filed with	the Florida Dept. of State)
	the Florida Dept. of State)
P11000082743	
(Document Number of Corpora	ntion (if known)
Pursuant to the provisions of section 607.1006, Florida State amendment(s) to its Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:
The Vending huy	s I tac
The Vending 649.  name must be distinguishable and contain the word "contabbreviation "Corp.," "Inc.," or Co.," or the designation "contain the word "chartered," "professional association association to the word "chartered," "professional association to the wor	Corp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA
(Manual and the MAT BE AT OST OTTICE BOX)	
D. If amending the registered agent and/or registered offic	
new registered agent and/or the new registered office ac	ldress:
Name of New Registered Agent:	NA
	MA
New Registered Office Address: (Flor	
New Registered Office Address. (110)	ALLA MILA
	(Zip Code)
(City)	) (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:
I hereby accept the appointment as registered agent. I am fan	
•	N/A

Signature of New Registered 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
	NA		Add Remove
	N/A	NA	☐ Add
	N/A	NA	
	nding or adding additional Article additional sheets, if necessary).		
	1	,	
<u>provis</u> ( <i>if</i>	sions for implementing the amend not applicable, indicate N/A)	inge, reclassification, or cancellation ment if not contained in the amends	nent itself:

The date of each amendment(s)	adoption: 10/26/1/
	(date of adoption is required)
Effective date if applicable:	o more than 90 days after amendment file date)
(11	o more man 20 days after amenament fire date)
	·
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	."
	oting group)
action was not required.  The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)  A BYOUN  (Typed or printed name of person signing)
	(Title of person signing)