## P11000 105606

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: Triangle TAX SERVICES INC.  DOCUMENT NUMBER: P11 000 105 606
DOCUMENT NUMBER: PI 000 03 006
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person  Hrangle tax Services  Firm/ Company  14975 NW 22nd Ave  Address  Opalocka FL 33054  City/ State and Zip Code
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (305) 972-4230  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 Certified Copy (Additional copy is enclosed)  \$35 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment

to

Articles of Incorporation of
Triangle TAX SERVICES INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
P11000105606
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:  The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
NIA
·
D. If amending the registered agent and/or registered office address in Florida, enter the name of the
new registered agent and/or the new registered office address:
Name of New Registered Agent
/ (Florida street address)
New Registered Office Address:, Florida
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

P = President; V = Vice	President; ( Tre = Chief Financia	Officer. If an officer/director holds more to	rustee; C = Chairman or Clerk; CEO = Chief han one title, list the first letter of each office
	aves the corporati	on, Sally Smith is named the V and S. These s	PST and Mike Jones is listed as the V. There is hould be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	PT John D  V Mike J  SV Sally S	<u>ones</u>	,
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>v p m</u>	Verneake Henderson	14975 NW 22nd Ave opa Locka, FC33054 US.
2) Change Add Remove	1	Debbie Cooper	14975 NW 22nd Ave Opa Locka, FL 33054 US
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change			

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)

Remove

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n amendment provides for an ex- ovisions for implementing the am	schange, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	/
	$\Lambda I/A$

• • • • • • • • • • • • • • • • • • •	0/24/12
The date of each amendment(s) a	adoption: 4 2
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	oproved 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	(voting group)
	(voting group)
action was not required.	lopted by the board of directors without shareholder action and shareholder
Dated	2/24/12
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	TIFCENY DouglaS (Typed or printed name of person signing)
	(Title of person signing)