

P/2000006553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600244490706

02/11/13--01013--009 **35.00

2013 FEB 11 AM 11:26

13 FEB 11 AM 11:26

2013 FEB 11 AM 11:26

Amend.

2-13-13

DC

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Barter Rewards
DOCUMENT NUMBER: P21000006553

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

Please return all correspondence concerning this matter to the following:

TRIT CARSON
Name of Contact Person
Barter Rewards
Firm/ Company
7485 Conroy Winderme Road Ste C
Address
Orlando FL 32835
City/ State and Zip Code
tcarsone@barterrewards.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TRIT CARSON at (407) 251 0980
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

Barter Rewards, Inc.

P12000006553

13 FEB 11 AM 11:21

A. If amending name, enter the new name of the corporation:

B. Enter new principal office address, if applicable:

C. Enter new mailing address, if applicable:

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:

(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

(Attach additional sheets, if necessary)

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.

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
-----------------	-----------	-----------------

X Remove **V** **Mike Jones**

X Add	SV	Sally Smith
-------	----	-------------

Title

Name

Address

1) Change	<u>P</u>	<u>James Howell</u>	<u>7485 Conroy Windermere Rd</u>
<u>X</u> Add			<u>Suite C</u>
☐ Remove			<u>Orlando FL 32835</u>

2) ☐ Change P Fred T Carson One San Jose Place
☐ Add Suite 17-4
☒ Remove Jacksonville, FL 32257

3) Change _____

Add _____

Remove _____

4) _____ Change _____
 _____ Add _____
 Remove _____

5) Change _____

Add _____

Remove _____

6) _____ Change
_____ Add
Remove

[illegible]

The date of each amendment(s) adoption: _____

January 1, 2013

Effective date if applicable: _____

January 31, 2013

(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)

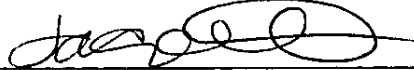
☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated _____

1-31-13

Signature _____



(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)

Jacquie Oliver

(Typed or printed name of person signing)

Secretary

(Title of person signing)