## P12000026121

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## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: BLM Businesses Inc. DOCUMENT NUMBER: P12000026121 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **Emile Messana** Name of Contact Person BLM Businesses Inc. Firm/ Company 1849 Monte Carlo Way Address Coral Springs, Florida 33071 City/ State and Zip Code emile@blmbiz.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Emile Messana Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & ■\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

## Articles of Amendment to Articles of Incorporation of

DLW Dussilesses IIIC.	
(Name of Corporation as currently filed with P12000026121	th the Florida Dept. of State)
(Document Number of Corpo	ration (if known)
•	· ·
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporat	tion:
	The new
name must be distinguishable and contain the word "cor "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc word "chartered," "professional association," or the abbrev	poration," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the
· :	**************************************
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	) <del></del>
C. Patricia and W. H. H. H. H.	₩ ° N
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
·	
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office.	ice address in Florida, enter the name of the address:
Name of New Registered Agent	
(FI	orida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for	amiliar with and accept the obligations of the position.
Signature of New Reg.	istered 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)

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 <math>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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	·
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) × Change Add Remove	CEO	Barbara L Messana	1849 Monte Carlo Way  Coral Springs, Florida  33071
2) Change	Р	Emile J. Messana	1849 Monte Carlo Way Coral Springs, Florida 33071
3) Change Add Remove	<del></del> -		
4) Change Add Remove			
5) Change Add Remove		· 	
6) Change Add Remove	-		

attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
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provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of idment if not contained in the amendm	ent itself:
provisions for implementing the amer (if not applicable, indicate N/A) e-issue shares as follow	s: Barbara L Messana; (	ent itself:
provisions for implementing the amer (if not applicable, indicate N/A)	s: Barbara L Messana; (	ent itself:
provisions for implementing the amer (if not applicable, indicate N/A) e-issue shares as follow	s: Barbara L Messana; (	ent itself:
provisions for implementing the amer (if not applicable, indicate N/A) e-issue shares as follow	s: Barbara L Messana; (	ent itself:
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provisions for implementing the amer (if not applicable, indicate N/A) e-issue shares as follow	s: Barbara L Messana; (	ent itself:

The date of each amendment(s) adoption: July 7, 2012			
Effective date if applicable:	ıly10, 2012		
<del>- 1-1</del>	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were as by the shareholders was/were	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	st for the amendment(s) was/were sufficient for approval		
by	,, ·		
	(voting group)		
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder		
select	director, president or other officer – if directors or officers have not been used, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)		
	Barbara L. Messana		
	(Typed or printed name of person signing)		
	CEO		
	(Title of person signing)		