## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850) 617-6380

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN ALPINE DATABASE SERVICES INC.

2,550, 5,50, 5	
Certificate of Status	0
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Electronic Filing Menu Corporate Filing Menu

## **COVER LETTER**

TO: Amendment Section Division of Corporations

	NAME OF COL	RPORATION: ALPINE D	ATABASE SERVICES I	NC.
	DOCUMENT N	шмвек: <u>P12000035</u>	5153	
	The enclosed Arr			
	Please return all	correspondence concerning th	is matter to the following:	
<u>.                                      </u>			Contract the second	
***** ****	<del></del>		Barbara Dang	-
		(Name	of Contact Person)	
		L	egalzoom.com, Inc.	
	. <del>,</del>		rm/ Company)	<del></del>
			•	
		•		
	·	100 W.	Broadway Suite 100	· · · · · · · · · · · · · · · · · · ·
			(Address)	
		Gia	ndale, CA 91210	
	_		tate and Zip Code)	
		(0.0)	and min 2117 Court	
	For further inform	nation concerning this matter,	please call;	
		Barbara Dang	at ( 323 ) 962-8600	1×7950
	(Nas	nc of Contact Person)	(Area Code & Daytime	Telephone Number)
	Enclosed is a che	ck for the following amount m	nade payable to the Florida Dej	
	\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43,75 Filing Fee & Certified Copy	\$52,50 Filing Fee Certificate of Status
			(Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
	Mailing A	ddereg	Street Address	
	Amendme	ent Section	Amendment Section	
		of Corporations	Division of Corporations	
		6327	Clifton Building	
		e, FL 32314	2661 Executive Center Ci	ircle
		,	Tallahassee, FL 32301	

position.

2012 JUN -4 PM 2: 38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment to Articles of Incorporation of

ALPINE DATABASE SERVICES INC.

(Name of Corporation as curr	ently filed with the Florida Dept. of Stat	<u>e</u> )
P12	000035153	
	nber of Corporation (if known)	
Pursuant to the provisions of section 607.100 following amendment(s) to its Articles of Incompany	06, Florida Statutes, this Florida Profit (poration:	Corporation adopts the
A. If amending name, enter the new name of	f the corporation:	
The new name must be distinguishable of incorporated" or the abbreviation "Corp.," "Co" A professional corporation name association," or the abbreviation "P.A."	"Inc.," or Co.," or the designation "C	orp." "Inc." or
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		
	W	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		
:		
;		· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or new registered agent and/or the new regis	registered office address in Florida, ente stered office address:	r the name of the
Name of New Registered Agent:	Pablo Sanchez	
	7667 North Wickham Rd Apt 1516	
New Registered Office Address:	(Florida street address)	
	Malbourne	Florida 32940
	(City)	(Zip Code)
New Registered Agent's Signature, if changing	ng Registered Agent:	
I hereby accept the appointment as registered		the obligations of the

Pabio Sanchez

Page 1 of 3

Signature of New Registered Agent, if changing



If smending 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)

	Title	;	Name			Address	Type of Action	
		· :	· · · · · · · · · · · · · · · · · · ·		<del></del> ,		Add Remove	
							□ Add □ Remove	
	<del></del>			· · · · · · · · · · · · · · · · · · ·			☐ Add.	
				1 •			ICINOVE	
	E, If am	ending h additi	or adding onal sheets	additional Article, if necessary). (	es, enter ch Be specific)	ange(s) bere:		
·	•			<del>T. C.C., </del>		<u> </u>		
					······			
	E. If an	amend	lment prov	idet for on evolu	nge reclas	diffication or concel	totion of wound charge	
	F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself; (If not applicable, indicate N/A)							
		<del></del>		<u></u>				
		•						
	**************************************							
			· · · · · · · · · · · · · · · · · · ·	:				
					Page 2	of 3		

The date of each amendmen	it(s) adoption: <u>05/25/201</u> 2	2.		
Effective date if applicable:	(no more than 90 days a	fter amendment file date)		
Adoption of Amendment(s)	(CHECK O	<u>NE</u> )		
The amendment(s) was/w by the shareholders was/w	ere adopted by the sharehovere sufficient for approval	lders. The number of votes	s cast for the amendment(s)	·
The amendment(s) was/w must be separately provide	ere approved by the shareh	olders through voting grou ntitled to vote separately or	ps. The following statement the amendment(s):	
"The number of votes	cast for the amendment(s)	was/were sufficient for ap	mońaj	
by		17.		
	(voting-group)			
The amendment(s) was/we action was not required.	•			·
The amendment(s) was/we action was not required.	ere adopted by the incorpor	rators without shareholder a	action and shareholder	
Dated_ A	P. Sauch	N		
Signature'	<u> </u>			
sel	y a director, president quot ected, by an incorporator — sointed fiduciary by that fi	her officer — if directors or if in the hands of a receive duciary)	officers have not been	
		Pablo Sanchez	San Same of Profession (See	
	(Typed or pr	inted name of person signin	ng)	
<u></u>	m			*
		President-		
	(Title	of person signing)		