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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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14 JUL 17 PH 1:51

JUL 3 0 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: CENTURION PROFESSIONAL Services INC. The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Centurion Professional Services Inc.
Firm/Company Miranda Lane, Suite 117
Address mer information concerning this matter, please call; at (32) 443-3234 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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

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

is enclosed)

Articles of Amendment to

Articles of Incorporation	
of	737
Centurion Professional Services	INC. 17 PH 1:59
(Name of Corporation as currently filed with the Florida Dept. of St	ate)
P12000041183	Translation of the second
(Document Number of Corporation (if known)	 /.

endment(s) to

Orlando Tax Master		
	INC.	
ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "Coord "chartered," "professional association," or	word "corporation," "company," or ' Corp," "Inc," or "Co". A professional	'incorporated" or the a corporation name must
. Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u>		
. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	E BOX)	
	<u></u>	
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(Mailing address MAY BE A POST OFFICE	istered office address in Florida, enter	the name of the
(Mailing address MAY BE A POST OFFICE If amending the registered agent and/or registered agent and/or the new registered.)	istered office address in Florida, enter red office address:	the name of the
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(Mailing address MAY BE A POST OFFICE If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered.)	ristered office address in Florida, enterered office address: (Florida street address)	the name of the

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 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>	Name	Address
1) Change			
Add Remove			
Remove			-
2) Change			
Add			
Remove			
3) Change			77 - 72 - 74
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
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6) Change	-		
Add			
Remove			

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The date of each amendment(s) adop	otion:	, if other than th
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more inan 90 days after amenament file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement ch 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)	
	(voting group)	
The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated 2/14/	114	
Dated <u>7/14/</u> Signature Jaw	ctor, president or other officer – if directors or officers have not been	
(By a direct	ctor, president or other officer – if directors or officers have not been	
	by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
_	Tavier A. Perez (Typed or printed name of person signing)	_
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	