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T. ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Murphy Consulting Services, P.A. DOCUMENT NUMBER: P12000051203
DOCUMENT NUMBER: P12000051203
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dennis J. Murphy
Musky Consulting Services Firm/Company
5741 SW 15 12 St.
Plantation, FL 33317
City/ State and Zip Code
E-mail address: (to be asad for future annual report notification)
For further information concerning this matter, please call:
Vennis J. Murphy at 954 321-9766
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 Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

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Article	es of Amendment	0118	CAFTA SEED
Articles	to of Incorporation	1200	OF CORPOR
$\Delta \Lambda$ and Δ	of	D A	C-3 PM 4:
11 Why Consulting	Sorvius	Y. A.	_ ' ' ' 4.
(Name of Corporation as currently filed with			
(Document Number of Corpora			_
suant to the provisions of section 607.1006, Florida Statute Articles of Incorporation:		ation adopts the following	ng amendment
If amending name, enter the new name of the corporation	on:		
N/A			The new
ne must be distinguishable and contain the word "corp orp.," "Inc.," or Co.," or the designation "Corp," "Inc, rd "chartered," "professional association," or the abbrevio	" or "Co". A professional		
Enter new principal office address, if applicable: incipal office address <u>MUST BE A STREET ADDRESS</u>)	<i>D/A</i>		_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		_
If amending the registered agent and/or registered office new registered agent and/or the new registered office ac		the name of the	_
Name of New Registered Agent	N/A	<u> </u>	
(Flor	rida street address)		
New Registered Office Address:		Florida	_
	(City)	(Zip Code)	
w Registered Agent's Signature, if changing Registered agent. I am fan			

Signature of New Registered 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 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	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One) 1) Change Add Remove	Title S	Rosemarie J. Muphy	Address 5741 SW 15th 57 Plantation, FL 33317
2) Change Add Remove 3) Change Add			
Remove 4) Change Add Remove			
5) Change Add Remove			
6) Change Add			

ttach additional sh	ng additional Articles, enter change(s) here: eets, if necessary). (Be specific)	
	NA	
an amendment pr	oyides for an exchange, reclassification, or cancellation of issued shares, ementing the amendment if not contained in the amendment itself:	
(if not applicab	le, indicate N/A)	
	1)/4	
<u>.</u>	~	

he date of each amendment(s) ad	option:
ffective date <u>if applicable</u> :	11-29-12
	(no more than 90 days after amendment file date)
option of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	or the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	oted by the board of directors without shareholder action and shareholder oted by the incorporators without shareholder action and shareholder
action was not required.	the mediporators without strateflorder action and strateflorder
Dated	Nember 29,20,2
Signature	Dent My
selected	rector, president or other officer—Vifidire ors or officers have not been , by an incorporator—if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	Dennis J. Mushy (Typed or printed name of person signing)
	(Typed or printed name of person signing)
_	tresident
	(Title of person signing)