## P12000053992

(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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T. LEWIS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

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NAME OF CORPORATION: I LAM FR	RIENDS INC	·
DOCUMENT NUMBER: P12000053	992	
The enclosed Articles of Amendment and fee are subr	nitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
SHAHNEEL S SHIKHAF	PORIA	
* ***	(Name of Contact Person	n)
TEAM FRIENDS INC		
	(Firm/ Company)	
2780 SE 58TH AVE		
	(Address)	
OCALA FL 34480		
	(City/ State and Zip Code	e)
DJ_VENAD@YAI		
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
DOMINIC JOHN	352	7890906
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	urtment of State:
\$35 Filing Fee \$\text{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	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building executive Center Circle ussee, FL 32301



December 5, 2012

SHAHNEEL S. SHIKHAPORIA TEAM FRIENDS INC 2780 SE 58TH AVE OCALA, FL 34480

SUBJECT: TEAM FRIENDS INC Ref. Number: P12000053992

We have received your document for TEAM FRIENDS INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 212A00028903

Thelma Lewis
Document Specialist Supervisor

www.sunbiz.org

## Articles of Amendment to Articles of Incorporation

## FILED

2012 DEC 14 PM 12: 56

P12 000 \$ 3992  (Document Number of Corporation (if known)  of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment  er the new name of the corporation:  The new make designation "Corp." "Inc." or "Co". A professional corporation name must contain the site and contain the word "corporation" "P.A."  The new fibre address, if applicable:  [UST BE A STREET ADDRESS]    Irress, if applicable:   BE A PONT OFFICE BOX     Irress, if applicable:   Irress,	GEAM FRIENC	DS INC.	Straes	* *1 II A 1.5
(Document Number of Corporation (if known)  of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment:  The new name of the corporation:  The new able and contain the word "corporation," "company," or "incorporated" or the abbreviation or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the sional association," or the abbreviation "P.A."  fice address, if applicable:  UST BE A STREET ADDRESS   dress, if applicable:  BE A POST OFFICE BOX)   Gred agent and/or registered office address in Florida, enter the name of the nud/or the new registered office address:  Stered Agent  (Florida street address)  fice Address:  (City)  (Zip Code)	(Name of Corporation as curre	ntly filed with the Florida Dept. of S	tate) IALLAHA	SSFF FI
(Document Number of Corporation (if known)  of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment:  The new state new name of the corporation:  The new stable and contain the word "corporation," "company," or "incorporated" or the abbreviation or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the sional association," or the abbreviation "P.A."  fice address, if applicable;  IUST BE A STREET ADDRESS )  Iress, if applicable:  BE A POST OFFICE BOX)   Sered agent and/or registered office address in Florida, enter the name of the nullor the new registered office address:  Stered Agent  (Florida street address)  fice Address:  (City)  (Zip Code)	P12,0000	53992		ישבב, דינ [
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ered agent and/or registered office address in Florida, enter the name of the nd/or the new registered office address:    Stered Agent	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	E BOX)		
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nd/or the new registered office address:    Stered Agent		·		_
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(Florida street address)  Nice Address:, Florida (City) (Zip Code)		ered office address.		
fice Address:, Florida	Name of New Registered Agent			
(City) (Zip Code)	<del></del>	(Florida street address)		
	New Registered Office Address:		, Florida	_
		(City)	(Zip Code)	
	Name of New Registered Agent  New Registered Office Address:  ew Registered Agent's Signature, if changing	. (City)		
	<del></del> -			
	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:	ore, and san	y Gillin, 57 as an Ada,	
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)	Title	<u>Name</u>	Address
1) _ Change	VP	SHAHZAD ALWANI	10053 BRAHDON CIRCLE
Add			ORLANDO
X Remove			<u>FLORIDA 32836</u> US
2) Change			
Add			
Remove			
3) Change			·
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
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6) Change			
Add			
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	ditional Articles, e Inecessary). (Be s	specific)	<del></del>		
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100 () - 200					
f an amendment provide	es for an exchange.	reclassification.	or cancellation	of issued shares,	
provisions for implemen	iting the amendmer	at if not contain	ed in the amendr	nent itself:	
(if not applicable, ind	licate N/A)				
			<u>.</u> .		. —
	<del></del>				<u> </u>

The date of each amendment(s) add	option: 14, 01, 9017
Effective date if applicable:	18.01.2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were adop by the shareholders was/were suff	sted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes east for	or the amendment(s) was/were sufficient for approval
by	,, ·
	(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
Dated 2. 1	1-2012
selected	ector, 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 ed fiduciary by that fiduciary)
_	SHAH HEE S SHIKHAPORIA
	(Typed or printed name of person signing)
_	PRESIDENT
	(Title of person signing)