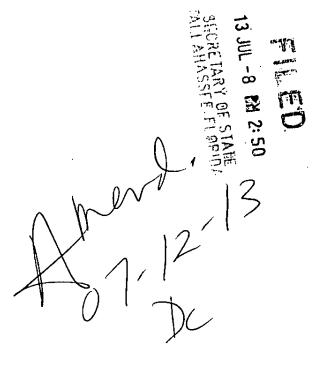
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(Requestor's Name)	-
(Address)	_
(Address)	_
·	
(City/State/Zip/Phone #)	-
PICK-UP WAIT MAIL	
(Business Entity Name)	-
(Document Number)	-
Certified Copies Certificates of Status	-
Special Instructions to Filing Officer: But for the formula office Use Only Office Use Only	Mer 13



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07/08/13--01008--008 **35.00



COVER LETTER

Division of Corporations NAME OF CORPORATION: 11/EGT THE The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person City/ State and Zip Code for future annual report notification) For further information concerning this matter, please call: 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 is enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

MEET THE BOOKER TH	CARPORATED
(Name of Corporation as currently filed with the Flo	orida Dept. of State)
PIZMMEZHAZ	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NIA	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Coword "chartered," "professional association," or the abbreviation "F	," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	4479 Dearwood Lake PKW Suite 2
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Tankendilla Florida
·	ZMIL.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A

D. If amending the registered agent and/or registered office address:	
Name of New Registered Agent N	
	FS 2 O
(Florida stre	
New Registered Office Address:	,Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
	•
Signature of New Registered A	gent, 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	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change		_ ///	
Add		•	
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			<u> </u>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add .			
Remove			

	NJA
	NA
	N/H
	,
	v.
an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
rovisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ALLA
	NIA
	•
<u> </u>	

The date of each amendment(s) adoption: 12813			
Effective date if applicable:			
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.		
	proved by the shareholders through voting groups. The following statement reach 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	NA		
•	(voting group)		
action was not required.	opted by the board of directors without shareholder action and shareholder		
action was not required.	opice by the mediporators without shareholder action and shareholder		
Dated 4	8/13		
Signature	ayoux otransys		
	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court		
	nted fiduciary by that fiduciary)		
аррол.	LAVONN BANKS		
	(Typed or printed name of person signing)		
	(Title of person signing)		