## P14000009534

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(Ad	dress)			
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· (Cit	y/State/Zip/Phone	· e #)		
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Amend Name 103/17/14 ch8

## COVER LETTER

TO: Amendment Section Division of Corporations

• • • • • • • • • • • • • • • • • • • •		
NAME OF CORPORATION: A	SSIDUOUS MANAGEMENT INC.	•
DOCUMENT NUMBER: P14		
The enclosed Articles of Amendme		
Please return all correspondence co	cerning this matter to the following:	
BARBA	RA WILLIAMS	
<del></del>	Name of Contact Person	
ASSIDI	IOUS MANAGEMENT INC.	
	Firm/ Company	
450 NV	214 ST #102	
	Address	
MIAMI,	FL. 33169	
	City/ State and Zip Code	
BJW20043	BELLSOUTH NET In bong assiduous night	محد م
	ddress: (to be used for future annual report notification)	·CCTT
For further information concerning	his matter, please call:	
BARBARA WILLIAM	S at (305 ) 301-5370	
Name of Contact Pe		
Enclosed is a check for the following	g amount made payable to the Florida Department of State:	
	Filing Fee & S43.75 Filing Fee & Cate of Status  Cate of Status  Certified Copy  (Additional copy is enclosed)  Certified Copy  (Additional Copy is enclosed)	
Mailing Address Amendment Section of Corp P.O. Box 6327 Tallahassee, FL	rations Division of Corporations Clifton Building	



February 24, 2014

BARBARA WILLIAMS ASSIDUOUS MANAGEMENT INC 450 NW 214 ST #102 MIAMI, FL 33169

SUBJECT: ASSIDUOUS MANAGEMENT INC.

Ref. Number: P14000009534

We have received your document for ASSIDUOUS MANAGEMENT INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

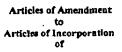
Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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.

Irene Albritton Regulatory Specialist II

Letter Number: 214A00004102





ASSIDUOUS MANAGEN	MENT INC.	_	
(Name of Corporation as	currently filed with the Flor	ida Dept. of State)	
P14000009534			<del>,</del>
(Document	t Number of Corporation (if ke	nown)	
Pursuant to the provisions of section 607.1 ts Articles of Incorporation:	006, Florida Statutes, this Flo	orlda Profit Corporation adopts	the following amendment(s) to
. If amending name, enter the new na	me of the corporation:		
ASSIDUOUS PROPERT	Y MANAGEMENT	FINC.	The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associat	ation "Corp," "Inc," or "Co	". A professional corporation	d" or the abbreviation name must contain the
B. <u>Enter new principal office address, i</u> Principal office address <u>MUST BE A ST</u>		<u>,                                     </u>	
		**************************************	<del></del>
			<del></del>
C. Enter new mailing address, if appli- (Mailing address MAY BE A POST)			
(	WINDOW		
			<u></u>
			•
<ol> <li>If amending the registered agent an new registered agent and/or the new</li> </ol>	d/or registered office address	s in Florida, enter the name of	<u>[the</u>
Name of New Registered Agent		AMS	
Name of New Registered Agent	J/W CJ/W C TTILLIN		
	(Florida et a		
	(Florida street	( DEBREST)	
New Registered Office Address:	(City)	, Fiorida	(Zip Code)
	(+-9)		(2) 0000)
N . B			
New Registered Agent's Signature, if ci I hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar wit	h and accept the obligations of	the position.
			•
SI	gnature of New Registered Ag	ent, if changing	
	,	- <del>-</del> -	

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: John Doe X Change PT X Remove Y Mike Jones X Add SV Sally Smith Type of Action (Check One) Title Address Name **BARBRA WILLIAMS** Change Add Remove **BARBARA WILLIAMS** 450 NW 214 ST. #102 Change MIAMI, FL. 33169 Add Remove Change Remove Change Add Remove Change Remove Change Remove

mending or adding additional Article additional Article additional sheets, if necessary)	r). (Be specific)
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	•
f an amendment provides for an e	exchange, reclassification, or cancellation of lasued phares,
provisions for implementing the a	Amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	<b>'</b>
	· · · · · · · · · · · · · · · · · · ·
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<u>,</u>	

		:	
		) )	
		}	
he date of each amendment(s) ad ate this document was signed.	option:	i .	if other than t
Iffective date if applicable:			
	(no more than 90 days	after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	3 •	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The numb	per of votes cast for the amendment(s)	
The amendment(s) was/were app must be saparately provided for	roved by the shareholders through a each voling group entitled to vote s	roting groups. The following statemen eparately on the amendment(s):	t
"The number of votes cast	for the amendment(s) was/were suff	icient for approval	
by		, <b>n</b>	
, <del></del>	(voting group)		
The amendment(s) was/were add action was not required.	pted by the board of directors witho	out shareholder action and shareholder	•
The amendment(s) was/were add action was not required.	pted by the incorporators without st	hareholder action and shareholder	
Dated 02/20/2	014	•	•
Signature Ba		-	
(By a d selecte	irector, president or other officer -	if directors or officers have not been its of a receiver, trustee, or other court	ATTACA
	BARBARA WILLIAMS		
	(Typed or printer	i name of person signing)	
	Pras, clent	,	
		person signing)	