P14000053995

(Req	juestor's Name)	
(Add	lress)	
(Add	Iress)	
(City	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
,		

Office Use Only

WIH000063249



800265109508

10/07/14--01023--010 **43.75

FILED

14 OCT 27 PN 1: 12

SEG SASSE OF STATE
TAIL / BASSE OF STATE

1027/H. C.R.M 10-16-14

COVER LETTER

TO: Amendment Section Division of Corpo				
NAME OF CORPOR	ration: Angel	MOH Inc.	TALLI 70	14 OCT 27
DOCUMENT NUME	BER: 7 140000	5399 <i>5</i>	· · · · · · · · · · · · · · · · · · ·	27
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	7.7	c P
Please return all corres	spondence concerning this ma	tter to the following:		1:12
	Andrea	Name of Contact Person	; 1	-
	Ang	el Mon In Firm/Company	c .	_
	4715 N.U		Je	. <u></u>
	0 - 0 + 4	Address		
	EOKAC :	SPRINGS F City/ State and Zip Code	<u>L 33076</u>	_
	E-mail address: (to be us	and rea @ 91 sed for future annual report	mail. com notification)	
For further information	n concerning this matter, pleas	se call:		
Andrea	Lalinde of Contact Person	at (954 Area Co		
Enclosed is a check fo	r the following amount made		•	
□ \$35 Filing Fee	\$43.75 Filing Fee & 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)	
	ling Address endment Section		Address Iment Section	
	sion of Corporations		on of Corporations	
P.O.	Box 6327		Building	
Tall	ahassee, FL 32314	2661 E	xecutive Center Circle	

Tallahassee, FL 32301

 $\epsilon = \mathbf{r}_{\mathbf{r}} = -1$

Articles of Amendment to

to	.41			
Articles of Incorporation of				
ANGEL N	lom Inc.			
(Name of Corporation as currently filed with the Florida Dept. of State)				
P140000	53995			
(Document Number of Corporation (if)	nown)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this Flits Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to			
A. If amending name, enter the new name of the corporation:				
GAIT ZENSE TOO	Thu 11-11			
SALT ZENSE INC. name must be distinguishable und contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co. word "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the			
B. Enter new principal office address, if applicable: (Principal office address MUST RE A STREET ADDRESS)	4715 N.W. 114th Drive			
	CORAL SPRINGS, FL			
	33076			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
D. If amending the registered agent and/or registered office address: Name of New Registered Agent	ss in Florida, enter the name of the			
(Florida street address)				
New Registered Office Address:	, Florida			
(City)	(Zip Codi)			
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.			
Signature of New Registered Ag				

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:				FAS F
X Change	<u> 14</u>	John Doc		racioni m
X Remove	<u>v</u>	Mike Jones		SECULIARISM
X Add	<u>sv</u>	Sally Smith		中工
Type of Action (Check One)	Title	Name	Address	PH 1:12
1) Change				<u> </u>
^dd		;		
Remove				
2) Change			_	·
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add			· · · · · · · · · · · · · · · · · · ·	
Remove				
5) Change				
Add				
Remove				· · · · · · · · · · · · · · · · · · ·
6) Change			· · · · · · · · · · · · · · · · · · ·	
^dd			 .	
Remove				

			766
			<u>்ற</u> ்ற 196
			(
110			3
			-
	····		
amendment provides for an exchange, r isions for implementing the amendmen	eclassification, or c	ancellation of issped sha the amendment itself:	ires.
(if not applicable, indicate N/A)			
			· · · · · · · · · · · · · · · · · · ·
			<u> </u>

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	ИТ
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	0072
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	R M
"The number of votes east for the amendment(s) was/were sufficient for approval	: 12
(voling group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	-
Andrea La Wide (Typed or printed name of person signing)	-
President	~
(Title of person signing)	



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 16, 2014

ANDREA LALINDE ANGEL MOM INC. 4715 N.W. 114TH DRIVE CORAP SPRINGS, FL 33076

SUBJECT: ANGEL MOM INC. Ref. Number: P14000053995

We have received your document for ANGEL MOM INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

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

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6838.

Cheryl R McNair Regulatory Specialist II

Letter Number: 414A00022259