## P170000119

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17 NOV -7 PH 3: 50°

SECRETARY OF STATE

And

R. WHITE NOV = 9 2007.

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO	N:OFL	CONSUMER SER	VICES	INC.		
DOCUMENT NUMBER: _		P17000088767				
The enclosed Articles of Ame	ndment and fee are su	bmitted for filing.				
Please return all corresponder	ace concerning this ma	tter to the following	g:			
		AVERY WILSO	N			
<del></del>		Name of Contac	et Persor	<u> </u>		
	OFL (	CONSUMER SER	VICES I	NC.		
		Firm/ Com	pany			
		4541 CYPRESS ST	REET			
		Address	s	<del></del>		
	ORLANDO FL 32811					
•		City/ State and	Zip Code	:		
	N	AME0823@GMAI	L.COM			
E-	mail address: (to be us	_		notification)		
For further information conce	rning this matter, pleas	se call:				
AVERY WIL	SON	at (	!1	_) 317-9034		
Name of Conta		Area Coo	le & Daytime Telephone Number			
Enclosed is a check for the fo	llowing amount made p	payable to the Flori	da Depa	rtment of State:		
	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Copy (Additional copenclosed)	,	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Ad				Address		
Amendment				ment Section		
Division of P.O. Box 63	Corporations			n of Corporations Building		
Tallahassee				sunding xecutive Center Circle		

Tallahassee, FL 32301

## **Articles of Amendment** Articles of Incorporation of

FILED

OFL CONSUMER SERVICES INC.

3:	50°
	3:

(Name of Corporation as currently filed with the Florida Dopt AfState) P17000088767 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) 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 with and accept the obligations of the position. 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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) X Change	Т	_	ELSIE TRUCKS	4541 CYPRESS ST
Add				ORLANDO FL 32811
Remove				
2) Change	<del></del>	_		
Add				
Remove				<del></del>
3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change	<del></del>			
Add				
Remove				
6) Change				
Add		<del></del>		
Remove				

<u>f amending or adding addi</u> Attach <i>additional sheets, if n</i>		(Be specific)	ects) here:			
	N/A					
		-				
					· <u>-</u> · · · · · · · · · · · · · · · · · · ·	<del>-</del>
		· ·		,		
	_	<del>.</del>				
				· · · · · ·		, <u> </u>
<u> </u>						
f an amendment provides f	<u>for an excha</u>	nge, reclassific	ation, or canc	ellation of iss	ued shares,	
provisions for implementing (if not applicable, indicable, indicab	ng the amen	<u>dment if not co</u>	ntained in the	amendment i	tself:	
(ij noi applicable, maici	ше ( <i>V</i> л) N/	/Δ				
·						
			<del></del>			
		· · · · · · · · · · · · · · · · · · ·				

	N/A	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this locument's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendmen ufficient for approval.	at(s)
	proved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	lder
selecte	hregior, president or other officer – if directors or officers have not been down an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	
	MONIQUE SINCLAIR	
	(Typed or printed name of person signing)	
	CFO	
	(Title of person signing)	