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SECRETARY OF STATE
SHALL BHASSET FOR BRIDA

Amond C.COULLIETTE

JUN 2 4 2010

EXAMINER

COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations MAZZEO INC NAME OF CORPORATION: 40000 15292 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PALM BEACH GARDENS, 71 ice@ mazzeoinc.com E-mail address: (to be used 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: ☐ \$52.50 Filing Fee \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐\$43.75 Filing Fee & Certificate of Status Certificate of Status **Certified Copy** Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section **Amendment Section Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

/VI A	2ZED, 1	٧ <u>٠</u>		
(Name of Corporation as cu	rrently filed with	the Florida Dept.	of State)	
		,		
(Document N	umber of Corporati	ion (if known)		
Pursuant to the provisions of section 607.16 amendment(s) to its Articles of Incorporation	·	es, this <i>Florida I</i>	Profit Corporatio	n adopts the following
A. If amending name, enter the new name	of the corporatio	n:		
	•	· <u>·</u>	t :	The new
name must be-distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or t name must contain the word "chartered," "p	he designation "C	orp," "Inc," or "	Co". A professi	porated" or the ' ional corporation
B. <u>Enter new principal office address, if a</u> (Principal office address <u>MUST BE A STRI</u>		2480 PR	ESIDENTIAL LUM BEACH	. Way, Apt. 180
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF)			GA BLUD #	+260 N5,71 33418
D. If amending the registered agent and/o new registered agent and/or the new re			da, enter the nar	ne of the
Name of New Registered Agent:				
	-	, l		
New Registered Office Address:	(Flor	ida street address	, Florida	
	(City)	<u> </u>	(Zip Code)	
New Registered Agent's Signature, if chan I hereby accept the appointment as registered	ging Registered A	gent: lliar with and acc	ept the obligation	s of the position.
·			<u>:</u>	
- · ·	Signature of New	Registered Ageni	t, if changing	TO JUN SEGNETAL

Page 1 of 3

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)

<u>Title</u>	Name		Address		Type of Action
				Add Remove	
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provisions	ndment provides for an exc for implementing the ame	haure, recla	sification, or can t contained in the	cellation of iss amendment i	ned shares. iself:
(IJ not a	applicable, indicate N/A)				1
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The date of each amendment(s)		<u> </u>		<u> </u>	
	(d	ate of adoption is		i	
Effective date if applicable:	no more than 90 da	ys after amendme		:	
		· ,			
Adoption of Amendment(s)	(CHEC)	K ONE)			
The amendment(s) was/were by the shareholders was/were	adopted by the share e sufficient for appr	reholders. The nu oval.	ımber of votes	cast for the ame	endment(s
The amendment(s) was/were must be separately provided	approved by the shi	archolders throug up entitled to vote	h voting group separately or	ps. The following the amendment	g stateme t(s):
"The number of votes ca	ist for the amendme	nt(s) was/were su	fficient for ap	proval	
by _		•	99		
	voting group)		 •	~ · · ·	•
action was not required. The amendment(s) was/were action was not required.	adopted by the inco	rporators without	t shareholder a	iction and sharel	nolder
•					
Dated	and.				
Signature	XXX 1/1		•	•	
(By a select	director, president of ed, by an incorporate nted fiduciary by the	or — if in the hand			
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