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## **COVER LETTER**

TO: Amendment Section Division of Corporations

V		
NAME OF CORPORATION:	57 (OAS) T	ORNAMENM (ME
DOCUMENT NUMBER: P95	00002513	7.
The enclosed Articles of Amendment and fee ar	e submitted for filing.	•
Please return all correspondence concerning this	s matter to the following:	
ANDREW (Name o	of Contact Person)	
EAST COAS	TOLNAMEN (m/ Company)	THE CARE / C.
301 W. CAI	MIND GADER (Address)	15 BLUD #200
BOCA PATS	ate and Zip Code) $-3$	3482
For further information concerning this matter, p	please call:	
(Name of Contact Person)	at (SB/) S (Area Code & Day	206 - 1906, rtime Telephone Number)
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\times \text{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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporatio Clifton Building 2661 Executive Cente	

Tallahassee, FL 32301

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

	EAST COAST ORNAMENTAL CARE IN	
	(Name of corporation as currently filed with the Florida Dept. of State)	
-	P95000025137.	ø
	(Document number of corporation (if known)	, ,
	e provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> - owing amendment(s) to its Articles of Incorporation:	二字
	ORATE NAME (if changing):  AB SALA GAHLE  word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")	'n
Must contain the A professional co	e word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") orporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")	
MENDMEN	NTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s)	
nd/or Article	Title(s) being amended, added or deleted: (BE SPECIFIC)	
	(Attach additional pages if necessary)	
	ent provides for exchange, reclassification, or cancellation of issued shares, provision	
or implement	ting the amendment if not contained in the amendment itself: (if not applicable, indicate N	υA <sub>,</sub>
	<b>A</b> 1 / /1	

(continued)

The date of each amendment(s) adoption: 12/26/06.
Effective date if applicable: (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
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):
"The number of votes cast for the amendment(s) was/were sufficient for approval by
(voting 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.
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)
(Typed or printed name of person signing)
_
PRESIDENT.
(Title of person signing)

FILING FEE: \$35