P9500063309

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORI	PORATION:	Century Management Services, Inc.		
DOCUMENT NU	NUMBER: P95000063309			
The enclosed Artic	cles of Amendment and t	fee are submitted for filing.		
Please return all co	orrespondence concernin	g this matter to the following:		
		Yesse Olivas		
		Name of Contact Person		
	Cer	ntury Management Services		
		Firm/ Company		
		1495 N Park Drive		
		Address		
	· Weston, FL 33326			
		City/ State and Zip Code		
	yesse@ E-mail address: (to b	centurymanagement.com e used for future annual report notification)		
For further inform	ation concerning this ma	tter, please call:		
	Yesse Olivas	at (954) 306-4108 Area Code & Daytime Telephone Number		
Name	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a chec	k for the following amou	nt made payable to the Florida Department of State:		
	\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed) 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 Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

Articles of Amendment **Articles of Incorporation** of

Century Management Services, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P95000063309

(Document Number of Corporation (if known)

owing

		The ne
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "pr	ie designation "Corp," "Inc,	" or "Co". A professional corporation
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		
D. If amending the registered agent and/or new registered agent and/or the new reg		Florida, enter the name of the
D. If amending the registered agent and/or new registered agent and/or the new reg		Florida, enter the name of the
new registered agent and/or the new reg		
new registered agent and/or the new reg	ristered office address:	

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)

Title	<u>Name</u>	Address	Type of Action
P\$	Mark Poffenbarger	1495 N Park Drive Weston, FL 33326	
<u>PS</u>	Ryan Poliakoff	1495 N Park Drive Weston, FL 33326	☑ Add □ Remove
(affach ac	lditional sheets, if necessary). (Be s	pecific)	
provisio	nendment provides for an exchange, ons for implementing the amendment of applicable, indicate N/A)		

The date of each amendmen	t(s) adoption: <u>1</u> 1	1/23/2010
Effective date <u>if applicable</u> :	11/23/2010	(date of adoption is required)
2	(no more than S	90 days after amendment file date)
Adoption of Amendment(s)	(<u>CH</u>	IECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes cast for the amendment(s) approval.
		ne shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amen	dment(s) was/were sufficient for approval
by		27
	(voting group)	
action was not required.		board of directors without shareholder action and shareholder incorporators without shareholder action and shareholder
Dated_12/7	7/2010	
sele		dent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		Ryan Poliakoff
	(Тур	ped or printed name of person signing)
		President
	(Title of	person signing)