P9500096686

(Re	questors Name)	
(Ad	dress)	<u> </u>
(Ad	dress)	·
(Cit	y/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL.
(Bu	siness Entity Nar	me)
,	•	,
(Do	cument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

Amend

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APR - 1 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION:	Instrument Sales, Inc	<u>3.</u>
DOCUMENT N	UMBER:	P95000096686	<u> </u>
The enclosed Arti	icles of Amendment and fee	are submitted for filing.	
Please return all c	orrespondence concerning th	is matter to the following:	
	· · · · · · · · · · · · · · · · · · ·	teven B. Greenman	and the same of th
	T.	Name of Contact Person	
	Ins	strument Sales, Inc.	
		Firm/ Company	
	3306 Er	nterprise Road, Suite 203	
		Address	
		rt Pierce, Fl 34982	
	C	City/ State and Zip Code	
	sgrise E-mail address: (to be use	com@uesi.com d for future annual report notification)	
For further inform	ation concerning this matter,	nlease call:	
	Sandy Griscom		37-3080
	of Contact Person	Area Code & Daytime Tel	lephone Number
Enclosed is a chec	k for the following amount n	nade payable to the Florida Depar	tment of State:
☑ \$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)
Mailing A		Street Address	
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301



March 23, 2010

STEVEN B GREENMAN INSTRUMENT SALES, INC. 3306 ENTERPRISE RD STE 203 FORT PIERCE, FL 34982

SUBJECT: INSTRUMENT SALES, INC.

Ref. Number: P95000096686

We have received your document for INSTRUMENT SALES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

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) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 810A00007173

Articles of Amendment to

to Articles of Incorporation

	of	3.	
1		<u> </u>	Alex Of
. Instrumen	I Sales.	Inc.	ASTON PA
(Name of Corporation as curre	ntly filed with the Florid	la Dept. of State)	SCORMS PAY
P95000	096686		103/2
	ber of Corporation (if kno	own)	A/OS
(07.100)	· Florida Canada alda E	North Book Comment	,
ursuant to the provisions of section 607.1006 nendment(s) to its Articles of Incorporation:	o, Florida Statutes, this r	uoruaa Projii Corporaud	m adopts the following
. If amending name, enter the new name of	the corporation:		
			The new
nne must be distinguishable and contain th			
bbreviation "Corp.," "Inc.," or Co.," or the			
me must contain the word "chartered," "prof	essionai association, or	ine appreviation P.A.	
Enter new principal office address, if appli			
rincipal office address <u>MUST BE A STREET</u>	<u>(ADDRESS</u>)		
			
			· · · · · · · · · · · · · · · · · · ·
27			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	CE BOX)		
			
			· · · · · · · · · · · · · · · · · · ·
		······································	
If amending the registered agent and/or re		n Florida, enter the nan	ne of the
new registered agent and/or the new regist	tered office address:	•	
Name of New Registered Agent:			
New Registered Office Address:	(Florida street a	addrass)	
wew Registered Office Address.	(1 tortuu sir eet u	iuur csay	
_		, Florida_ (Zip Code)	
	(City)	(Zip Code)	•
w Registered Agent's Signature, if changing	Registered Agent:		
ereby accept the appointment as registered ag		nd accept the obligations	of the position.

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 .	Name	Address	Type of Action
· VP	Patricia A Marazzi	3306 Enterprise Road Suite 203 Fort Pierce, FL 34982	
		· 	□ D
	ling or adding additional Articles, editional sheets, if necessary). (Be s		
provisio (if no	nendment provides for an exchange ons for implementing the amendmen of applicable, indicate N/A)		
n/a			
			- <u>, , , , , , , , , , , , , , , , , , ,</u>

The date of each amendment	(s) adoption:
Tecasia da le angla da la	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
The amendment(s) was/wer must be separately provided	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	east for the amendment(s) was/were sufficient for approval
by	,,,
	(voting group)
action was not required. The amendment(s) was/were	e adopted by the incorporators without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
action was not required. Dated	3/29/2910
Signature	Mm
(By a selec	a director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	FICHANO SPERLING
	(Typed or printed name of person signing)
	SR. VICE PRESIDENT CFO
	(Title of person signing)