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Account Number : I2000000195 : (850)521-1000 : (850)558-1515 Fax Number

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shayla.wolfe@zdi.com Email Address:\_\_\_

## COR AMND/RESTATE/CORRECT OR O/D RESIGN **BOOK ZURMAN, INC.**

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 5, 2011

DEIT 2, ZUIT

BOOK ZURMAN, INC. 12420 73RD COURT SUITE B LARGO, FL 33773

SUBJECT: BOOK ZURMAN, INC.

REF: P96000019119

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To: DIVISION OF CORPORATIONS

Company:

Fax: 8506176380

Phone:

From: Harry Davis

Fax:

Phone: (850) 521-0821x2926 E-mail: hdavis@cscinfo.com

**NOTES:** 

Date and time of transmission: 4/5/2011 3:46:32 PM Number of pages including this cover sheet: 6

4/5/2011 3:48:12 PM PAGE 4/006

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

	11 APR 5 AM 10: 25
)	AHASSEE. FLORIE

Book Zurman, Inc.	AHASSE
(Name of Corporation as currently filed with the Florida Dept. of State)	TORIS
P96000019119	
(Document Number of Corporation (if known)	

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following

		4 4	11	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Corp	," "Inc," or "C	Co". A professione	atea or the al corporation
B. Enter new principal office address, if app (Principal office address MUST BE A STREE				<del></del>
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)				
D. If amending the registered agent and/or new registered agent and/or the new regi	registered office ad stered office addre	dress in Florid ss:	a, enter the name	of the
Name of New Registered Agent:		-		
New Registered Office Address:	(Florida	street address)	<del></del>	
	(City)		, Florida (Zip Code)	
	. •••	.4-	izip Codej	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a	ng Registered Age agent. I am familia	nt: r with and acce	pt the obligations o	f the position.
,	Signature of New Re	oistered Agent	if changing	

Fax Server	Þ

4/5/2011 3:48:12 PM PAGE

5/006

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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)

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	(voling group)						
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