P98000003139

| (Requestor's Name) |
|--|
| (Address) |
| . (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status _: |
| Special Instructions to Filing Officer: |
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2009 NOV 16 AM 8: 2: SECRETARY OF STATE

Amend

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COVER LETTER

| Division of Corporations |
|--|
| SUBJECT: NEWSTAR LEARLY + DEVELOPMENT INC |
| DOCUMENT NUMBER: P 98 006603139 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Name of Person) New Star Real Let The C. (Name of Firm/Company) 377 Buchanan St. (Address) Letty Wood, Froziota |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| (Name of Person) at (38) 322-405 (Area Code & Daytime Telephone Number) |
| (Alea Code & Daytille Telephone Number) |

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO: Amendment Section

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Articles of Amendment

to

Articles of Incorporation of

| Λ | , OI | . 1 | | 700 |
|---|--------------------|---|--------------------------------------|----------------------|
| NEW STAR K | EARTY | + DE | NECOPA | IENT I'M |
| Name of Corporation as curre | ntly filed with t | | | / |
| P98006 | 6036 | 39 | | |
| (Document Num | ber of Corporation | on (if known) | | • |
| ` | • | | | |
| Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation: | i, Florida Statute | es, this <i>Florida P</i> | rofit Corporation | adopts the following |
| A. If amending name, enter the new name of | the corporation | <u>ı:</u> | | |
| | | | | The new |
| name must be distinguishable and contain to abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "prof | designation "Co | orp," "Inc," or ^{**} C tion," or the abbi | Co". A professio reviation "P.A." | nal corporation |
| B. Enter new principal office address, if appl | licable: | 322 | Buchai | nan ST |
| (Principal office address <u>MUST BE A STREE</u> | | 606 | | |
| | | | | |
| | | HO11 | 1 wood | 1 /2000 13/ |
| a = | | | | 7330M |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC | | | | |
| (Maning data ess MIT BE 711 OS1 OF 110 | <u> 22 BOX</u>) | | | |
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| | | | | |
| D. If amending the registered agent and/or re | egistered office | address in Florid | a, enter the name | e of the |
| new registered agent and/or the new regis | tered office add | ress: | | د۔ |
| Name of New Registered Agent: | | | Ę | 0 B |
| | | | | 强重二 |
| New Projection of Office Address. | (FI) | J44 J.J) | | 芸芸の |
| New Registered Office Address: | (Fioria | da street address) | | SSER |
| <u>-</u> | | ·- · · · · · · · · · · · · · · · · · · | , Florida (Zip Code) | |
| | (City) | | (Zip Code) | G. 5. |
| New Registered Agent's Signature, if changin | g Registered As | zent: | | |
| I hereby accept the appointment as registered as | | | ot the obligations | of the position. |
| | | | | |
| Si | gnature of New | Registered Agent, | if changing | |
| ~~, | φ | (۳۰۰۰ م | ,oo | |

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 |
|-------------------------|--|------------------------------------|----------------|
| VD | FRIEDA DRAGIF | 3421 NRANCRID | í 🗂 Add |
| | TETEDI DE BIT | House Fift | Add Remove |
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| | or adding additional Articles, enter cl | | |
| (attach addit | ional sheets, if necessary). (Be specific |) | |
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| F. If an amen | dment provides for an exchange, reclas | sification, or cancellation of iss | ued shares, |
| provisions (if not a | for implementing the amendment if no applicable, indicate N/A) | t contained in the amendment i | tself: |
| (1) 1101 4 | ppiicable, maicale WA) | | |
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| The date of each amendment(s) adopt | ion: 11-8-64 |
|---|---|
| • | (date of adoption is required) |
| Effective date if applicable: (no more | e than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/were adopted by the shareholders was/were suffici | d by the shareholders. The number of votes cast for the amendment(s) ent for approval. |
| must be separately provided for each | ed by the shareholders through voting groups. The following statement in voting group entitled to vote separately on the amendment(s): |
| by wating g | PRESIDENTY OFFICER |
| The amendment(s) was/were adopted agricon was not required. | d by the board of directors without shareholder action and shareholder |
| The amendment(s) was/were adopted action was not required. | by the incorporators without shareholder action and shareholder |
| Dated | 1-9-09 |
| selected, by a | r, president of other officer – if directors or officers have not been un-incorporator – if in the hands of a receiver, trustee, or other court uciary by that fiduciary) |
| | ANDIZEA K. SILVERTHORNE (Typed or printed name of person signing) PRESIDENT / PIRETOR |
| , | PRESIDENT/PIRETOR |