P98000049899

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Amend

B JUN - 8 2010

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: NOT/CO, INC. DOCUMENT NUMBER: P 98000049899 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Noolco, Inc. 12914 MAGNOLA POINT BUND
Address

ClERMONT FL 34711

City/ State and Zip Code MOON (S) MSN. COM.
ress: (to be used to future annual report notification) For further information concerning this matter, please call: at (<u>407</u>) <u>426-1111</u> Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐ \$43.75 Filing Fee & **□** \$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

	to	20 11
Ar	ticles of Incorporatio	on Supplied A
	of	CASES ON L
Mode	CO Tuc.	ALLAETA AL
(Name of Corporation as current	tly filed with the Florid	a Dept. of State)
799 A	000 Ha Q Q	a Dept. of State) A Dept. of State Why Why A Dept. of State A Dept. of State
(Document Numb	er of Corporation (if kno	Up)
(Boetiment Number	er or corporation (if kno	wii)
resuant to the provisions of section 607.1006, nendment(s) to its Articles of Incorporation:	Florida Statutes, this F	lorida Profit Corporation adopts the following
If amending name, enter the new name of the	he corporation:	
		The new
Enter new principal office address, if applice principal office address, if applice principal office address MUST BE A STREET. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) If amending the registered agent and/or registered agent and/or the new registered.	EBOX) gistered office address i	
Name of New Registered Agent:		
Name of New Registered Agem.		
New Registered Office Address:	(Florida street d	address)
		Elorida
	(City)	, Florida (Zip Code)
	(City)	(all) code)
ew Registered Agent's Signature, if changing hereby accept the appointment as registered age	Registered Agent:	

Signature of New Registered Agent, if changing

• 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>	<u>Name</u>		<u>Address</u>	Type of Action
PRIBS	PENT	SANDRA MOENSSE	INS 12914 Moundin	Add
			GORMONT, FL 3471	Title change
1:ce-11	CES <u>IPENI</u>	NOG! MOONSSENS	12914 MAUNOLIAR	Add
			Address NS 12914 Moundia POINT BLUD CHERMONT, FL 3471 12914 MAGNOLIA E BLUD CHERMONT, FL 34	Remove Change
				_ 🔲 Add
				_ □ Remove
		ng additional Articles, enter chets, if necessary). (Be specific)		
		(Be specific)		
				· · · · · · · · · · · · · · · · · · ·
**	<u> </u>			
	,			
			sification, or cancellation of iss	
	sions for imple not applicable		t contained in the amendment	<u>itseit:</u>
				

The date of each amendment(s) adoption: 1-1-2010
f ffeetive date if applicables	(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/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	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 ca	st for the amendment(s) was/were sufficient for approval
by	voting group)
(*	voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	<u>le/2010</u>
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)