555985

(Re	questor's Name)	
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(Cit	y/State/Zip/Phon	e #)
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SECRETARY OF STATE



COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: Manatee Floral, Inc Bos 5 Bocument number: \$55985
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Please return all correspondence concerning this matter to the following: Whiting Preston
Name of Contact Person Manatee Floral, Inc. Firm/ Company
Po Box 31
Address
City/ State and Zip Code
Krystalp@manateefloral.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Whiting Preston at (941) 721-0600 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation

of
 Floral Trans

Manatee Floral,	Inc
(Name of Corporation as currently filed with the	Florida Dept. of State)
<u> 555985</u>	
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this tits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NA	The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA SECRETARIO AL MARIANTA DE LA MARIANTA DEL MARIANTA DEL MARIANTA DE LA MARIANTA DEL MARIANTA DE LA MARIANTA DEL MARIANTA DE LA MARIANTA DEL MARIANTA DE LA MARIANTA DEL MARIANTA DE LA MARIANTA DE LA MARIANTA DEL
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Fl.)	durate different
New Registered Office Address: N A	street address), Florida
(Cit	y) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	
;	with and accept the borigations of the position.
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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith. SV as an Add.

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Example: X Change	<u>PT</u>	<u>John D</u>	<u>oe</u>	
X Remove	<u>v</u>	Mike J	<u>ones</u>	
_X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	ΛD	_	Walter L. Preston	1511 51st StW
Add				Bradenton, FL 3420
Remove				
2) Change	PSI)	Whiting H. Preston	1509 4th St W
Add			9	Palmetto, Fl 34221
Remove				
3) Change		_		
Add Remove				
Kemove				14 00 17 10 10 10 10 10 10 10 10 10 10 10 10 10
4) Change				
Add				200
Remove				
5) Change	-	_		
Add				
Remove		ن د		
6) Change		/		
Add	/			
Remove				
			Page 2 of 4	

amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
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an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
A/I	
	
	

The date of each amendment(s) adoption: 10/114 date this document was signed.	,∙if other	than the
Effective date if applicable: (no more than 90 days after amendment file date)		
(no more than 90 days after amendment file date)		
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.		
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):		
"The number of votes cast for the amendment(s) was/were sufficient for approval		
by	ه ـــ	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	OCT -7 AM 11: 40	
Whiting H. Preston (Typed or printed name of person signing) President, Secretary, Director		