P04000120211

(Requ	estor's Name)	
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(City/S	State/Zip/Phon	e #1
PICK-UP		
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Certified Copies	Certificate	s of Status
Special Instructions to Fili	ng Officer:	
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: MAGALY MORE	tles, CORP.
DOCUMENT NUMBER: P040001202	11
The enclosed Articles of Amendment and fee are submitted for fil	ing.
Please return all correspondence concerning this matter to the following	owing:
MAGALY MORALE (Name of Contact Person)	5
MAGALY MOOX (Firm/Company)	155, Conf.
3650 INVERDARY.	
LAUderhill, Flonz (City/ State/ and Zip Code)	
For further information concerning this matter, please call:	•
MAGALY MOOLY LES at 954 (Name of Contact Person) (Area Co	717-4154
Enclosed is a check for the following amount:	de & Daytime Telephone Number)
□ \$35 Filing Fee	y Certificate of Status
Amendment Section Amend	Address Iment Section on of Corporations

409 E. Gaines Street

. Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 25, 2005

MAGALY MORALES 2ML MAGALY MORALES, CORP 3650 INVERRARY DR. #2K LAUDERHILL, FL 33319

SUBJECT: MAGALY MORALES, CORP

Ref. Number: P04000120211

We have received your document for MAGALY MORALES, CORP and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6878.

Alan Crum Document Specialist

Letter Number: 805A00024777

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Articles of Amendment to Articles of Incorporation

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	MAGAK	1 Neps	ales, Co	orp.	LAR LAR	Π
_	(Name of corpo	ration as currently	y filed with the Florid	la Dept. of State)	1-9 1-18 1ASS	
	PAU	00017	0 211		FF ST	Π
			of corporation (if kno	(awe		フ
Pursuant to the pradopts the following		•	_	_	Corporation	
NEW CORPOR	ATE NAME (if c	hanging):	•	•		
			MMUNIC	ations	Inc.	
(Must contain the wo	rd "corporation," "co	mpany," or "incoi	porated" or the abbre	eviation "Corp.," "Inc	.," or "Co.")	_
(A professional corpo			•			
AMENDMENTS and/or Article Titl				•	le Number(s)	
	orporate		· · · · · · · · · · · · · · · · · · ·	<u> </u>		
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		(Attach additions	ıl pages if necessary)	 		-
If an amendment properties of the second sec		•	•		' L	ı
				er.		7.

(continued)

The date of each amendment(s) adoption: 3-39-05
Effective date if applicable: (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were approved 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
(voting group)
☐ 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.
Signed this 20 day of MARCH, 2005
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)
MAGALY WOORALES
(Typed or printed name of person signing)
Prosident
(Title of person signing)

FILING FEE: \$35