## P06000124910

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SUCRETARY OF STATE
ORIO.

MAY 01 2014 C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: QQRIIINC
DOCUMENT NUMBER: Y06000124910
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rimaj Barrientos  Name of Contact Person
Name of Contact Person
Firm/ Company
4662 SW 74MAVE
Miami, FL 33155
City/ State and Zip Code
Derfectac Solutions @gmail.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ring Barrientos at 305 878-2207  Name of Contact Person Area Code & Daytime Telephone Number
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)  \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)  \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment** tion

	to
Articles	of Incorporat
	of

WURL LIVC		
(Name of Corporation as currently filed with the Florida	Dept. of State)	26
P06000124910	~~ • σ 	<u> </u>
(Document Number of Corporation (if know	n) FT	PR
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> its Articles of Incorporation:	a Profit Corporation adopts the following ar	-0 !!
		₹ C
A. If amending name, enter the new name of the corporation:	2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.	<b>№</b>
IV. A.	Th	ne new
name must be distinguishable and contain the word "corporation," "c "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". word "chartered," "professional association," or the abbreviation "P.A."		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	Florida, enter the name of the	
Name of New Registered Agent		
(Florida street add	ress)	
N D 1 100 AU	m	
New Registered Office Address: (City)	, Florida(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with an	d accept the obligations of the position.	
Signature of New Registered Agent,	if changing	

If amending the Officers	s'and/or Directors, enter the t	itle and name of each o	fficer/director being	removed and title,	name, and
address of each Officer a	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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>S</u>	LUIS FERREIRA	
Add			·
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<u></u>		
Add			
Remove			
6) Change			
Add		··· ————	
Remove			

(Attach additional sheets, if ned	cessary). (Be specific)	s) nere.	
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			· · · · · ·
	· · · · · · · · · · · · · · · · · · ·		
F. If an amendment provides fo provisions for implementing (if not applicable, indicated)	the amendment if not conta	on, or cancellation of is nined in the amendment	sued shares, itself:
	·		
		9	

The date of each amendment(s) ad-	option:	, if other than the
date this document was signed.	·	
Effective date if applicable:		
•	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopt action was not required.	oted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoptaction was not required.	eted by the incorporators without shareholder action and shareholder	
Dated	ector, president or other officer – if directors or officers have not been	
Signature	Lu-a	
(By a dir	ector, president or other officer - if directors or officers have not been	
Sciecteu,	by an incorporator – if in the hands of a receiver, trustee, or other court diduciary by that fiduciary)	
_	Times Bassiantos (Typed or printed name of person signing)	<u>.                                    </u>
	(Typed or printed name of person signing)	
_	PRESIDENT	
	(Title of person signing)	