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OCT 1 6 2013

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

The state of the s	TERPRISES IN	C		
DOCUMENT NUMBER: P0900005233	6			
The enclosed Articles of Amendment and fee are su	binitted for filing.			
Please return all correspondence concerning this ma	tter to the following:			
ELKE ROLFF				
	Name of Contact Person	n		
ROLFF LAW PA				
	Firm/ Company			
8818 HARDING AVE				
	Address			
MIAMI, FL 33154				
	City/ State and Zip Cod	e		
ER@ROLFFLAW.CO	OM			
E-mail address: (to be us	sed for future annual report	notification)		
For further information concerning this matter, pleas	se call:			
ELKE ROLFF	786	282-3553		
Name of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fee Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Division Clifton 2661 E	Address Innent Section on of Corporations Building Executive Center Circle		

Articles of Amendment to Articles of Incorporation

FILED

OCT -7 AM 11: 15

ROLFF ENTERPRISES INC.

(Name of Corporation as currently filed with the Florida Dept. of State) DALLAHASSEE, FLORIDA-

P09000052336

dment(s) to

(Document Number of Corporation	on (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation FABULOUS ASSETS CO.	1: The nev
name must be distinguishable and contain the word "corpor "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," word "chartered," "professional association," or the abbreviati	ration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	8818 HARDING AVE
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33154
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8818 HARDING AVE
MANUEL MA	MIAMI, FL 33154
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add Name of New Registered Agent	
(Floria	da street address)
New Registered Office Address:	"Florida
	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am famil	
Signature of New Register	red 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PD	ELKE ROLFF	8818 HARDING AVE
Add			MIAMI, FL 33154
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional A ttach additional sheets, if necessary). (Be specif	ic)			
•					
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					<u> </u>
THE RESERVE OF THE PERSON OF T					
an amendment provides for an ex	rahamaa waala	asificution			
rovisions for implementing the ar	<u>nendment if n</u>	ot contained i	the amendme	nt itself:	
(if not applicable, indicate N/A)					
					 ,

The date of each amendment(s) adoption:	, 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 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" (voting group)	
(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.	
Dated_10/03/2013	
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)	
ELKE ROLFF	
(Typed or printed name of person signing)	
PRES/DIR	
(Title of person signing)	