

P09000059377

Division of Corporations

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Florida Department of State
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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : US AG 24
Account Number : I20060000089
Phone : (305)767-2040
Fax Number : (866)470-2984

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TALLAHASSEE, FLORIDA

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CAS HOLDING GROUP INC

Certificate of Status	0
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Help

N/C & Amend.

11/14/2009 3:58:23 PM US AG 24 Inc. 18664702984



November 12, 2009

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CAS HOLDING GROUP INC
1378 CHESAPEAKE AVE
NAPLES, FL 34102

SUBJECT: CAS HOLDING GROUP INC
REF: P09000059377

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please accept our apology for failing to mention this in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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) 245-6906.

Darlene Connell
Regulatory Specialist II

FAX Aud. #: H09000237887
Letter Number: 809A00035355

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CAS HOLDING GROUP INC

DOCUMENT NUMBER: P09000059377

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PETER HARRIS

Name of Contact Person

US AG 24 Inc.

Firm/ Company

3001 N. Rocky Point Drive East 2nd Floor

Address

Tampa, Florida 33607

City/ State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PETER HARRIS

Name of Contact Person

at (305) 767-2040

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee

\$43.75 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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

09 NOV 16 PM 4: 28
SECRETARY OF STATE
TALLAHASSEE FLORIDA
FILED

Articles of Amendment
to
Articles of Incorporation
of

CAS HOLDING GROUP INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P09000059377

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

DRAGON CAPITAL CORPORATION

The new

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the 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 Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street 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 and accept the obligations 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	US AG 24 INC	3001 N. Rocky Point Dr E 2ND FLOOR Tampa, Florida 33607	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
P	Alexander Kallai	1378 CHESAPEAKE AVE NAPLES, FL 34102	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A

F. If 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)

N/A

The date of each amendment(s) adoption: 11/04/2009

(date of adoption is required)

Effective date if applicable: 11/04/2009

(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)

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 11/04/2009

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)

MICHAEL O. SCHUETT

(Typed or printed name of person signing)

INCORPORATOR

(Title of person signing)