P09000065092

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
| (Business Entity Name) |
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| (Document Number) |
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SECRETARY OF STATE
TALLAHASSEF FIGURE

RAPOS

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATI | ON: | KKK Inc. | |
|--|--|---|--|
| a massace of the same | | EVEL MED'S | 1. 00 000 |
| DOCUMENT NUMBER: | | P09000065092 | |
| The enclosed Articles of A | | · Just | |
| Please return all correspond | lence concerning this n | natter to the following: | |
| | Phetsadak | hom Boudsyvongsakd | |
| | Nam | e of Contact Person | |
| | | | |
| · | | Firm/ Company | |
| | | | |
| , | <u> , , , , , , , , , 132</u> | 27 Halapa Way | |
| | | Address | ٠ ٠ موس |
| THE DESCRIPTION OF MEMORY | | 55080300035 | |
| | Tri | nity, FL 34655 State and Zip Code | Barrier |
| *** | ** .; City | State and Zip Code | |
| | Phet123 | @yahoo.com | |
| E | -mail address: (to be used f | or future annual report notification) | |
| For further information con | ncerning this matter, pl | ease call: | |
| Phetsadakhom E | oudsyvongsakd | at (585) 6 | 43-5906 |
| Name of Contact | | Area Code & Daytime Tel | ephone Number |
| Enclosed is a check for the | following amount mad | de payable to the Florida Depar | tment of State: |
| | 3.75 Filing Fee & ertificate of Status | | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address | | Street Address | |
| Amendment Section | | Amendment Section | |
| Division of Corpor | ations | Division of Corporations | |
| P.O. Box 6327 Tallahassee, FL 32314 | | Clifton Building 2661 Executive Center Circ | le |
| 1 ananassee, 1 L 32314 | | | · • |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

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| cles of Incorporation | o n | |
|--|--|--|
| of | | SECRETARY OF STATE |
| (Inc. | > | SEC. 106/9 |
| filed with the Florid | ia Dept. of State) | LLANTARY PH 2: 2 |
| 065092 | | ASSER OF ST |
| | own) | - TORIE |
| orida Statutes, this <i>F</i> | Florida Profit Coi | rporation adopts the follow |
| corporation: | | |
| nh Group Inc. | | The new |
| word "corporation," gnation "Corp," "In | c," or "Co". A | "incorporated" or the professional corporation |
| ole: ODRESS) | | |
| | | |
| BOX) | | , |
| | | • |
| | | |
| tered office address d office address: | in Florida, enter | the name of the |
| (Florida street | address) | |
| | | Florida |
| (City) | (Zip C | |
| agistared Agents | | |
| . I am familiar with a | and accept the ob | ligations of the position. |
| | • | _ • • |
| ture of New Registere | ed Agent, if change | ing |
| | of Inc. filed with the Florid 065092 of Corporation (if known or ide Statutes, this Florida Statutes, this Florida Statutes, this Florida Statutes, this Florida Statutes, "Inh Group Inc. word "corporation," or ide: DDRESS) EOX) Gered office address: (Florida street (City) Egistered Agent: I am familiar with | Inc. [Inc.] [Iled with the Florida Dept. of State] [Iled with the Florida Profit Co. [Iled with the Florida Dept. of State] [Iled with the Florida Profit Co. [Iled with the Florida Dept. of State] [Iled with the Florida Dept. of State] [Iled with the Florida Profit Co. [Iled with the Florida Dept. of State] [Iled with the Florida Dept. of State] [Iled with the Florida Dept. of State] [Iled with the Florida Profit Co. [Iled with t |

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> | Type of Action |
|--------------|--|---|--|
| | · · · · · · · · · | | Add |
| | | | ☐ Remove |
| | | | |
| | | | Remove |
| | | | |
| | | | ☐ Remove |
| | | | ···· |
| E. If ame | nding or adding additional A | rticles, enter change(s) here: | |
| | additional sheets, if necessary, | | |
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| F. If an | amendment provides for an estimate an esti | exchange, reclassification, or cancell mendment if not contained in the an | lation of issued shares, nendment itself: |
| (i | f not applicable, indicate N/A) | | |
| | | | |
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| The date of each amendment(s | s) adoption: $\sqrt{-17-09}$ |
|---|--|
| Effective date if applicable: | (date of adoption is required) |
| Enecute date <u>ii applicable</u> . | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/were by the shareholders was/wer | e adopted by the shareholders. The number of votes cast for the amendment(s) the sufficient for approval. |
| | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s): |
| "The number of votes ca | ast for the amendment(s) was/were sufficient for approval |
| by | voting group) |
| | adopted by the board of directors without shareholder action and shareholder |
| action was not required. | adopted by the incorporators without shareholder action and shareholder. |
| Dated | 08/17/2009 |
| Signature(By a | |
| | Phetsadakhom BoudsyvongsAKd (Typed or printed name of person signing) |
| | Pre sident (Title of person signing) |