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(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	#)
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COVER LETTER

TO: Amendment Section Division of Corporations	*
NAME OF CORPORATION: NC Design	gn Concepts, Inc
DOCUMENT NUMBER: P13000052	261
The enclosed Articles of Amendment and fee ar	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
Natali Cobena	
	Name of Contact Person
NC Design Cor	ncepts, Inc.
	Firm/ Company
6010 Shakerwo	ood circle 104B
	Address
Tamarac, FL 3	3319
	City/ State and Zip Code
natalicah@amail.c	om
natalicob@gmail.c	be used for future annual report notification)
E man address. (to e	to used for future united report notifications
For further information concerning this matter, p	please call:
Natali Cobena	at (954) 6380094
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Statu	
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 to Articles of Incorporation of

NC Design Concepts, Inc		
(Name of Corporation as currently filed with the F	lorida Dept. of State)	_
P13000052261		_
(Document Number of Corporation (if	f known)	_
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the following	ng amendment(s)
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	Co". A professional corporation name must	ibbreviation contain the
B. Enter new principal office address, if applicable:	10152 NW 50th Street	_
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Sunrise, Florida 33351	_
		_
		_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(maining address MAT BEATOST OF THE BOA)		_
		- ##
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address		THE 21
Name of New Registered Agent Natali Cobena		
6010 Shakerwo	od circle 104B	OF STATE
(Florida str	eet address)	与公司
New Registered Office Address: Tamarac	, Florida 33319	<u>.</u>
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent am familiar v	with and accept the obligations of the position.	
Signature of New Registered A	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 <math>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 Do	<u>oe</u>		
X Remove	<u>V</u>	Mike Jo	ones		
X Add	<u>sv</u>	Sally Si	nith		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change	СТО	<u>. </u>	Shuaib Khan		937 NW 201 Ave
Add	, .,			_	Hollywood, Florida 33029
Remove					
2) Change					
Add					
Remove					
3) Change		_	***************************************		
Add					
Remove					
4) Change		_			
Add					***
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					
Kemove					

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
	<u>. </u>
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
* 1441000 *	

The date of each amendment(s) adoption: January 1st	2014	if other than the
date this document was signed.		
Effective date if applicable: January 1st 2014 (no more the	nan 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the shareholders. by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)	
The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitle		
"The number of votes cast for the amendment(s) was	s/were sufficient for approval	
by(voting group)	.,,	
The amendment(s) was/were adopted by the board of direct action was not required.	ctors without shareholder action and shareholder	
The amendment(s) was/were adopted by the incorporators action was not required.	s without shareholder action and shareholder	
Dated February 11, 2014		
Signature Marallette		
	r officer – if directors or officers have not been in the hands of a receiver, trustee, or other court ciary)	
Natali Cobena		
(Typed	d or printed name of person signing)	
President		
	(Title of person signing)	
	•	