Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Fax Number : (305)456-2910

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN **EMEWAY CORPORATION**

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Corporate Filing Menu

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COVER LETTER

09/21/2016 12:12 FAX 3054562910 B				2 1002
TO: Amendment Sect Division of Corpo		COVER LETTER		16 St. 2. P. L
NAME OF CORPOR	RATION: EMEWAY CORP	ORATION		S. O. O.
	BER: P14000013755			•
	of Amendment and fee are su		•	
Please return all corres	spondence concerning this ma	tter to the following:		
	NELSON ODELLA			
·	PRESIDENT	Name of Contact Person	,,	
		Firm/ Company		
	6447 MIAMI LAKES DR E	AST STE 103A		
Address MIAMI LAKES, FL 33014				
		City/ State and Zip Cod	e	
LENS	SUR-ACCOUNTING@LIVE	.СОМ		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
NELSON ODELLA		at (305	3648824	
Name (of Contact Person	Arca Co	do & Daytime Telephone Number	_
Enclosed is a check for	r the following amount made	payable to the Florida Depa	riment of State:	
\$35 Filling 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)	
Ame Divi P.O.	ling Address Indment Section Islon of Corporations Box 6327 Industrial Section	Amend Division Clifton 2661 E	Address ment Section on of Corporations Building executive Center Circle assee, FL 32301	

Articles of Amendment to Articles of Incorporation of

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lorida, enter the name of the
137)
, Florida
(Zip Code)

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Iones	
X Vqq	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
I) Change	-		
Add			
Remove			
2) Change			
Add		- ,	
Remove			
3) Change			
Λdd			
Remove			
4) Change			
Add			
Remove			·
5) Change	**********	<u> </u>	· ·
Add			
Remove	•		
6) Change		4.0	
Add			
Remove			

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	09/21/2016	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
09 Effective date <u>if applicable</u> :	/21/2016	
- I Applicable	(no more than 90 days after amendment file date)	·
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date very performent of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
The amendment(s) was/were a must be separately provided for	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes can	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder	
09/21/201 Dated	6 Slaver	
Signature		
salect	director, president of other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court med fiduciary by that fiduciary)	
	NELSON ODELLA	
	(Typed or printed name of person signing)	
	P/S	
	(Title of person signing)	