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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: DECOTAC, Inc.				
DOCUMENT NUMBER: 360240				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Michelle Travani				
Name of Contact Person				
Decotac, Inc.				
Firm/ Company				
2421 N. Bay Rd				
Address /				
Manu Beach, Ft. 33140 City/ State and Zip Code				
City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
E-mail address: (to be used for future annual report nonflication)				
For further information concerning this matter, please call:				
Michelle Ivavani at 186, 586-2093				
Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status (Additional copy is enclosed) \$35 Filing Fee & Certified Copy (Additional Copy is enclosed) \$35 Filing Fee & Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building				

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

٠	Articles of A				
	Articles of Inc	corporation		SECTION ASSECTION OF THE PERSON OF THE PERSO	
(Name of Corporation as cur	rently filed with the F	Jorida Dent. of Sta	rte)		J 1
(Nume of Cot potation as cus		2000 Dept. 01 30	<u>ite</u>)	95.7 C	
(Document N	umber of Corporation (i	f known)			
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	6, Florida Statutes, this	Florida Profit Corp	poration adopts the	following amend	lman(s) to
A. If amending name, enter the new name	of the corporation:				
				The n	iew
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designatio word "chartered," "professional association	n "Corp," "Inc," or "	'Co". A profession			
B. Enter new principal office address, if a (Principal office address MUST BE A STRE					
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OF I					
D. If amending the registered agent and/or	registered office addi	ress in Florida, ent	er the name of the		
new registered agent and/or the new re		<u>:</u>			
Name of New Registered Agent	Michelle :	Havani			
_	2421 N.	Bay Rd			
		eet address)			
New Registered Office Address:	Malu Be	<u>lach</u>	, Florida 35	140 Code)	
	(0.19)		(23.45)	Coucy	
New Registered Agent's Signature, if change I hereby accept the appointment as registered			obligations of the p	oosition.	
Signat	ure of New Registered A	Igent, 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 Doc	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
_X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
I) X Change Add Remove	<u>D</u>	Michelle Travani	
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove		.	
5) Change Add Remove			
6) Change Add Remove			

amending or adding additional attach additional sheets, if necessa	ry). (Be speci	ific)			
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an amendment provides for an encovisions for implementing the second (if not applicable, indicate N/A)	amendment if r	ssification, or not contained i	cancellation on the amendm	f issued shares ent itself:	<u>.</u>
				·	
-		_			
	<u></u>				

4/10/12
The date of each amendment(s) adoption:
Effective date if applicable: 4 19 12
(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 4/19/12
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 Iravani
(Typed or printed name of person signing)
Director
(Title of person signing)