605693

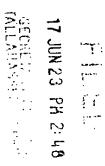
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JUNES 1917 S. PRATHER

COVER LETTER

TO: Amendment Section Division of Corporations	? —
NAME OF CORPORATION: ARREL ENTERPRISES, THE DOCUMENT NUMBER: 605693	•
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Shav: Leventhal Name of Contact Person Avrel Enterprises, Inc. Firm! Company State Road 84 Address Oavie FL 33321 City! State and Zip Code Shav: Leventhale Yahoo. Com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call: Shavi Leventhal at (954) 673-416 / 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 S43.75 Filing Fee & Certificate of Status	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment

to

ARREÏ	rticles of Incorporation	CERT	7/
(Name of Corporation	as currently filed with the Flor	ida Dept. of State	/VC.
405	693	Mil 192 pri ser terreta	
(Docume)	nt Number of Corporation (if know	wn)	
Pursuant to the provisions of section 607,1006, Florida S its Articles of Incorporation:	Statutes, this <i>Florida Profit Corpo</i>	oration adopts the following	g amendment(s) t
A. If amending name, enter the new name of the corp	poration:		
			Тhе неш
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the at	"Inc," or "Co". A professiona		
B. Enter new principal office address, if applicable:		1	
(Principal office address <u>MUST BE A STREET ADDR</u>	<u>MESS</u>)		بر ا
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			그 !!
(Stating datess <u>3131 DL/A (V31 VI FRC)</u>			∽;
			
			
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		r the name of the	
Name of New Registered Agent			_
	(Florida street address)		_
New Registered Office Address:		, Fiorida	
	(City)	(Zip	Code)
New Registered Agent's Signature, if changing Regist thereby accept the appointment as registered agent. The		bligations of the position	
Signat	ure of New Registered Agent, if cl	nanging	-

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: <u>X</u> Change	PT John	Doe	
X Remove	<u>V</u> <u>Miks</u>	2 Jones	
X Add	<u>SV</u> <u>Sally</u>	· <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	51	Sheldon Laventhel	825 Savanna Falls Drive
Add			weston, FL 33327
Remove			. 54
2) Change	(v <u>)</u> 5	Shari Leverthal	18540 w State Road 84 Pavie, FL 33324
,			
Remove 3 + Change	<u></u>	Wendy Franklin	1373 Garden Road
X Add		,	Westen FL 3332/
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

.tach <i>additional sheei</i>	ts, if necessary).—(Be	r specifici			
					
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	.				_
				-	
					<u>. </u>
					···
an amendment prov	<u>vides for an exchange</u> menting the amendme	reclassification,	or cancellation of d in the amendme	issued shares.	
(if not applicable,	, indicate N/A)				
			.		
				-	
			· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s) adoption:	, if other than the
date this document was signed. Effective date if applicable: 5/1/2017	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
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.	17 JUN
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	23 F
Dated 6 17 2007	3 2: L a
Signature	_
selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Shari Leventh	
(Typed or printed name of person signing)	
Vice President	

(Title of person signing)