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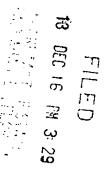
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WHO JOSUN

COVER LETTER

TO: Amendment Section

Division of Corporations					
NAME OF CORPORATION: Orlando Plating Co. DOCUMENT NUMBER: FO8888					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Servet Ara/ Name of Contact Person					
Firm/ Company					
415 E. Pine 54 1512 Address					
Orlando, FL 32801 City/ State and Zip Code					
Ara/or/ando @ ao/. com E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Name of Contact Person at (321) 578-8956 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 Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

of		
Griando Plating C	.O	···
(Name of Corporation as currently filed with the Flo	orida Dept. of State)	
		
(Document Number of Corporation (if	known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the follow	ing amendment(s) to
A. If amending name, enter the new name of the corporation:		
Aral aclanda Pla-	ting Co.	The new
name must be distinguishable and contain the word "corporation		abbreviation
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "F		t contain the
word Charteen. projessional association. Of the above tallion 1	1 (72).	25
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
(17 m. ipa vija e maress <u>we 31 bl. A 31 ke El ADDRESS</u>)	<u> </u>	
	ŗ.	तन्त्र का हिन
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	415 E. Pine St. 13	درے ω
(Maning daness MAY BE A POST OFFICE BOX)	Orlando, FC 32801	
	Orlando, FC 32801	/
		
D. If amending the registered agent and/or registered office address:		
Name of New Registered Agent Anal, Ser.	vet	
415 E. Pine iFlorida stre	5	
New Registered Office Address: Or lando	. Florida 3280/ !Zip Code)	/
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. Van familiar w	rith and accept the obligations of the position	ı.
Signature of Montegistered A	gent, if changing	
\mathcal{L}		

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/du ector 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 = Clief Executive Officer: CFO = Clief 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	PT	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove			
2) Change			
Remove 3) Change			
Add Remove			
4) Change			
Remove			
Change Add	ــــــــــــــــــــــــــــــــــــــ		
Remove			
6) Change Add Remove			

	ary). (Be spec	ific)		
	·			
				
If an amendment provides for a	n exchange, rec	assification, or ca	ncellation of issued	shares,
provisions for implementing the	e amendment if	not contained in	the amendment itsel	<u>t:</u>
(if not applicable, indicate N	Z4)			
			•	
				,

The date of each amendment(s) adoption:	
Effective date if applicable:	
(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 graup)	
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	
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 accepts by that fiduciary)	
Servet ARAL	
(Typed or printed name of person signing)	
President (title of person signing)	