N06000012854

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11 (10/09

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: SOLIDARITY M	1-DAN	1ACO	
DOCUMENT N	UMBER: N06000012854			
The enclosed <i>Arti</i>	cles of Amendment and fee are subm	nitted for	r filing.	
Please return all c	orrespondence concerning this matte	r to the f	following:	
_	OSNEL	. CAJU	STE '	
	(Name of C	Contact F	Person)	
	SOLIDARIT	Y M-D	AMACO	
	(Firm/	Compan	ny)	
	5073 EAST 1	ΓΑΜΙΑΙ	MI TRAIL	
_	(Ac	ddress)		
٠	NAPLES	S, FL 34	4113	
	(City/ State	and Zip	Code)	
_	CHERISOL1 E-mail address: (to be used	@YAH for futur	OO.COM re annual report notifica	tion)
For further inform	nation concerning this matter, please	call:		
VILER CHERI	SOL	at (954) 410-1980	0
(Na	me of Contact Person)			ne Telephone Number)
Enclosed is a chec	ck for the following amount made page	yable to	the Florida Department	of State:
\$35 Filing Fee	☑ \$43.75 Filing Fee & Certificate of Status	Certif	,	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P	Iailing Address mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314		Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation

FILED
LUUS NOV -9 D.
SECRETARY OF STATE
—— "ASSEF OF STATE

SOLIDARITY M-DAMACO, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)	- SEENFLORIN

N06000012854	
(Document Number of Corporation (if known)	

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts

e following amendment(s) to its Articles of Incorporation:		
If amending name, enter the new name of the corpora	tion:	
e new name must be distinguishable and contain the wo breviation "Corp." or "Inc." "Company" or "Co." may t		
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registered offinew registered agent and/or the new registered office:		enter the name of the
Name of New Registered Agent:		· ·····
New Registered Öffice Address: (Fl	orida street address)	
·	(City)	, Florida (Zip Code)
w Registered Agent's Signature, if changing Registered agents of a sition.		ecept the obligations of
Signature of N	ew Registered 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)

<u>Title</u>	Nama	Address	Type of Action
D	VILER CHERISOL	3333 W COMMERCIAL BLVD.	i ☑ Add
	***	FORT: LAUDERDALE: FL 33309	•
		·	
D	REMY CHERISOL*	3333 WICOMMERCIAL BLVD	☑ Add
		STE 105 Services FORT LAUDERDAL'E, FL 33309	☐ Remove
	* *	+ VIV. CAUDEINDADE, I C 03003	_
		 	☐ Add ☐ Remove
	nding or adding additional Articles, enter		
•	additional sheets, if necessary). (Be specifi	,	
ARTICLE	EIX. Upon the dissolution of this orga	inization, assets shall be distr	ibuted for
one or m	nore exempt purposes within the mean	ning of section 501(c)(3) of th	e Internal
Revenue	e Code, or corresponding section of a	any future federal tay code	
	· · · · · · · · · · · · · · · · · · ·		
or shall b	be distributed to the federal governme	ent, or to a state or local gove	rnment, for
a public į	purpose.		
		**	
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		The Marie Towns of the Common	
	A STATE OF THE STA	· 阿克尔斯斯斯	

The date of each amendment(s) adoption: 10/30/2009
Effective date if applicable: 11/03/2009
(no more than 90 days after amendment file date)
The state of the s
Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated_11/02/2009
Signature le le le So
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporater – if in the hands of a receiver, trustee, of other court appointed fiduciary by that fiduciary)
Viler Cherisol
(Typed or printed name of person signing)
Director
(Title of person signing)

Page 3 of 3

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