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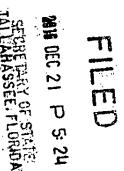
(Req	uestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

CADVA, INC. NAME OF CORPORATION:			
N11000003606			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	mitted for filing.		
Please return all correspondence concerning this matter	er to the following:		
An	neilia Boodoosingh		
	(Name of Contact Perso	on)	
•			
	(Firm/ Company)		
	4512 Woodland Circle		
	(Address)		
	Tamarac, Florida 33319		
	(City/ State and Zip Coo	de)	
a	llan@the3rddegree.net		
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:		
Ameilia Boodoosingh	at		(813)-679-6490
(Name of Contact Person	n) (A	rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Dep	partment of S	State:
□ \$35 Filing Fee \$\square\$\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy is sed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CADVA, INC.

(Name of Corporation	as curren	tly filed with the Florida Dept. of	State)
	N	11000003606	
(Docur	nent Numb	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida Not For Profit Corp</i>	poration adopts the following
A. If amending name, enter the new name of the	e corporati	on:	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		ion" or "incorporated" or the abb	The new reviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		4512 Woodland Circle	
		Tamarac, Florida 33319	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4512 Woodland Circle	
		Tamarac, Florida 33319	
D. If amending the registered agent and/or reginew registered agent and/or the new register			ime of the
Name of New Registered Agent:	Ameilia Boodoosingh		
	4512 Woo	odland Circle	
New Registered Office Address:		(Florida street add	Press)
	Tamarac		, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if changing Is the hereby accept the appointment as registered agent the appointment as registered agent the second			ns of the position.
		gnature of the Registered Agent	Pchanging CRP TARY CARRESTEE
	j	Page 1 of 4	re _{co}

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 X Remove X Add	<u>V</u> <u>M</u>	hn <u>Doe</u> ike Jones Ily Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PRES	Sukree Boodram	12650 Eryn Blvd
Add _X Remove			Clermont, Florida 34711
2) Change	DIR	Ninawattie Budhram	7157 Harbor Heights Circle
Add X Remove			Orlando, Florida 32835
3) Change	DIR	Ann Cohen	9515 Savona Winds Drive
Add X Remove			Delray Beach, Florida 33446
4) Change	PRES	Ameilia Boodoosingh	4512 Woodland Circle
X Add			Tamarac, Florida 33319
Remove			813-679-6490
5) Change	DIR	Allan S. Gopie	4512 Woodland Circle
XAdd			Tamarac, Florida 33319
Remove			954-557-5495
6) Change	DIR	Beverly V Ramjass	7702 SW 6th Court
X Add			North Lauderdale, Florida 33068
Remove			786-286-4773

. If amending or adding addition (attach additional sheets, if neces	sary). (Be specific	c)			
					
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i ne date of each amendment(s) a	aoption:	_, if other than the
date this document was signed.		
Effective date if applicable:	January 1, 2017	
<u></u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the D	ock does not meet the applicable statutory filing requirements, this date will not be partment of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a was/were sufficient for approx	idopted by the members and the number of votes cast for the amendment(s) ral.	
There are no members or men adopted by the board of direction	abers entitled to vote on the amendment(s). The amendment(s) was/were tors.	
Dated	12/7/16	
Signature	nebou tra	_
have not be	rman or vice chairman of the board, president or other officer-if directors cen selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
	Sukree Boodram	
	(Typed or printed name of person signing)	
	President/Board of Director and Agent	
	(Title of person signing)	