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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	1
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

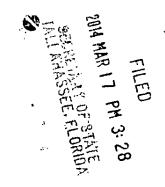
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3/18/14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N: MORED	I Inc.	
DOCUMENT NUMBER:			· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Am	endment and fee are subn	nitted for filing.	
Please return all corresponde	nce concerning this matte	r to the following:	
	Eri	Ca Eteke (Name of Contact Person)
	Mor	EDI Inc. (Firm/Company)	
		ebeau st.	
(Cleanuater		
		(City/ State and Zip Code)
——Е	info@mo	for future annual report r	otification)
For further information conc	erning this matter, please	call:	
Enica Ed (Name of Co	TIEKE	at (727 (Area Co	
Enclosed is a check for the for			
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fec Certificate of Status Certified Copy (Additional Copy is Enclosed)
2.5 111 1	•	g, ,	

Mailing Address

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

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Street Address

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

		Amendment o	FILED	
	Articles of Ir	corporation	, a DM	3: 28
^ •	0	of	2014 MAR 17 PM	_ eme*
(V\C	KEDI 1	nc.	- A Y OF	31/12 1000
(Name of Corporation as currently filed	I with the Florida	Dept. of State)	TÄLLÄHÄSSEE.	(COM
(Document	Number of Corpora	ition (if known)	'9 .	
Pursuant to the provisions of section 617.1006, Famendment(s) to its Articles of Incorporation:	Florida Statutes, this	s <i>Florida Not F</i>	or Profit Corporation a	dopts the follow
A. If amending name, enter the new name of	the corporation:			
nla				The
name must be distinguishable and contain the w "Company" or "Co." may not be used in the no		or "incorporate	ed" or the abbreviation	
B. Enter new principal office address, if appl	icable:	nla		
(Principal office address MUST BE A STREET		11/91		
	·····			
		 		
C. Enter new mailing address, if applicable:		010		
(Mailing address <u>MAY BE A POST OFFIC</u>	<u>'E BOX</u>)	11/9		<u> </u>
				
				
D. If amending the registered agent and/or re	egistered office add	: dress in Florida	. enter the name of the	<u>.</u>
new registered agent and/or the new regis				•
Name of New Registered Agent:	n/9		.	
	•			
Nov Projectored Office Address	(Floria	la street address)		
New Registered Office Address:				
-	(City)		, Florida	7: (0.1)
	(Chy)		(Zip Code)
New Registered Agent's Signature, if changing the hereby accept the appointment as registered ag			t the obligations of the p	osition.
_				
Sign	ature of New Regis	tered Agent, if c	hanging	

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Page 1 of 4

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: XChange X Remove X Add	PT John I V Mike SV Sally	Jones .	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove	VP_	Rhada Rossman	1512 Beverly Pl. Albany, CA 94706
2) Change Add Remove	VP_	Sylvie Ngonkane	5 Greenway Lane Cartersville, GA 30120
3) X Change Add Remove	TR	Rob Zare	345 Columbus st. El Granada, CA 94018
4) _X_ Change Add Remove	TR	Jon Hughes	10026 Stone Ave N. Seattle, WA 9813?
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Artic	cles, enter change(s) here:	
(attach additional sheets, if necessary).	(Be specific)	
nla		
		
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	e date of each amendment(s) adoption:	, if other than the
Effe	ective date <u>if applicable</u> : (no more than 90 days after amendment file date)	_
	(no more than 90 days after amenament file date)	
Ado	option 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.	
4	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Signature (By the chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing) Secretary In corporator (Title of person signing)	