1-6PPOODPIN

(Re	equestor's Name)			
(Ad	dress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
: (Bu	isiness Entity Nar	me)		
(Do	ocument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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COVER LETTER

TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:			
N14000004421 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	mitted for filing.		
Please return all correspondence concerning this matte	er to the following:		
Molly Cintron			
	(Name of Contact P	erson)	
Sin-Cera, Inc.			
	(Firm/ Compan	y)	
1220 S Dale Mabry Hwy Ste 201			
	(Address)		genth Mille Integ
Tampa, FL 33629			
	(City/ State and Zip	Code)	
mollycintron@yahoo.com			
E-mail address: (to be used	for future annual re	port notification	
For further information concerning this matter, please	call:		
Molly Cintron	a	813	531-2391
(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida	Department of	State:
\$35 Filing Fee \$\square\$		Certifi is Certifi	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address		treet Address mendment Secti	ion.
Amendment Section Division of Corporations		menament Secti ivision of Corpo	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle



April 25, 2016

MOLLY CINTRON 1220 S DALE MABRY HWY STE 201 TAMPA, FL 33629

SUBJECT: SIN-CERA, INC Ref. Number: N14000004421

We have received your document for SIN-CERA, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 816A00008499

Tracy L Lemieux Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

SIN-CERA,INC		
(Name of Corporation	as currently filed with the Florid	da Dept. of State)
N14000004421		
(Docum	ent Number of Corporation (if kno	own)
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	,	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A)	ole: ODRESS)	-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	BOX)	
D. If amending the registered agent and/or regis new registered agent and/or the new registered		enter the name of the
	MOLLY CINTRON	
	14907 N 24TH ST	
Nov Boristand Office Address	(Flor	rida street address)
<u>New Registered Office Address</u> :	LUTZ	Florida 2
	(City)	(Zip Gode)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		
· _	Signature of New Registe	red 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)

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>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DIR	LUZ RIVERA	PO BOX 270731
Add			TAMPA, FL 33688
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
•	
	A/A
	/*/ <i>H</i>
	· · · · · · · · · · · · · · · · · · ·

	date of each amend this document was		: 4/6	21//CP		_, if other than the
Effe	ective date <u>if applic</u>		no more than 90 da	ys after amendment file	e date)	
	e: If the date inserte ument's effective date	d in this block does	not meet the applic	able statutory filing rec	quirements, this date will not	be listed as the
Ada	option of Amendme	nt(s)	(CHECK ONE)			
8	The amendment(s) was/were sufficient	•	by the members and	the number of votes ca	st for the amendment(s)	
	There are no membadopted by the boa		itled to vote on the a	amendment(s). The am	nendment(s) was/were	
	Dated	5/1	0/16			
	Signature	mo	ely (intro	<u></u>	
		have not been selec		ator - if in the hands of	ther officer-if directors a receiver, trustee, or	
			Polly Cir	The M		
			' (Typed or p	rinted name of person s	signing)	
		Pres	ident /	CEO		
			· ((Title of person signing	;)	