

(Ro	equestor's Name)	
(Ac	ddress)	<u>.</u>
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(Ci	ity/State/Zip/Phone #	f)
PICK-UP	☐ WAIT	MAIL
(B)	usiness Entity Name	)
(Da	ocument Number)	
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Special Instructions to	Filing Officer:	
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2011 FEB 25 P & 13
SECRETARY OF STATE

T. 1544200



## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATIO	N:WET PLEA	SURES, INC.		
DOCUMENT NUMBER: _	P01000085383	<u> </u>		
The enclosed Articles of Amo	endment and fee are su	ıbmitted for filing		
Please return all corresponde	nce concerning this ma	tter to the followi	ng:	
		Alberto N	. Moris	
		Name of Cont	act Persor	1
	MORIS & ASSOCIATES			
		Firm/ Cor	npany	
	3	8650 NW 82nd A	VE., Suite	401
		Addre	ess	
		Doral, FL	. 33166	
		City/ State and	l Zip Cod	e
		abermudez@an	mpa.com	
E	-mail address: (to be u	sed for future ann	ual report	notification)
For further information conce	erning this matter, pleas	se call:		
Alberto	N. Moris	at (	305	
Name of Com	act Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the fo	ollowing amount made	payable to the Flo	rida Depa	rtment of State:
S35 Filing Fee	IS43.75 Filing Fee & Certificate of Status	□\$43.75 Filin Certified Co (Additional c enclosed)	py py	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

	W1
W	ET PLEASURES, INC.
(Name of Corporation as	currently filed with the Florida Dept. of State)
	P01000085383
(Document )	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpor	ation:
	The new
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inword "chartered," "professional association," or the abbre	orporation," "company," or "incorporated" or the abbreviation nc," or "Co". A professional corporation name must contain the
B. <u>Enter new principal office address, if applicable;</u> (Principal office address <u>MUST BE A STREET ADDRES</u>	<u></u>
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
D. If amending the registered agent an <u>d/or</u> registered of	ffice address in Florida, enter the name of the
new registered agent and/or the new registered office	
Name of New Registered Agent	
4	Florida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am	
	ZIII FED TALLAH
Signature	of New 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)

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	<u>PT</u> John	<u>Doe</u>	
$\underline{X}$ Remove	<u>V</u> <u>Mike</u>	· Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
I) Change	С	AHMED ELBANA	888 S EAST COAST AVE.
X Add	Chairman	)	LANTANA, FL 33462
Remove			
2) Change			
Add			
Remove			
3 ) Change			_
Add			
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change			
Add			
Remove			
6) Change			
Add			
Ramove			

Attach addition	adding additional Ar ad sheets, if necessary).	. (Be specific)			
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IF	ant amoulded for an ar-	ahunua makasifian	stion of opposituation	an of ingual aboves	
provisions for	ent provides for an exc implementing the am	rendment if not cor	itained in the amer	idment itself:	
(if not app	olicable, indicate N/A)				
	<del></del> -				
				<u>.</u>	<u></u>
		<del></del>			

The date of each amendment(s) adoption:	if other than the
Effective date if applicable:	
Effective date if applicable:  (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was were adopted by the shareholders. The number of votes cast for the expendment(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 east for the amendment(s) was were sufficient for approval	
hy	
(voting group)	
☐ 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.	
2-20-18	
Signature Movamed M Fahmy	
(By a director, president or other officer - if directors or officers have not been	<del></del>
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
MOHAMED M FAHMY	
(Typed or printed name of person signing)	
President	
(Title of person signing)	