

PO1000086969

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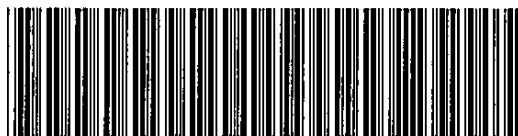
(Business Entity Name)

(Document Number)

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10/10/06--01046--007 \*\*43.75

FILED  
06 OCT 10 PM 2:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Amendment

10/11/06

De

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** TOYRRIFIC, INC

**DOCUMENT NUMBER:** P01000086969

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steve Delgado

(Name of Contact Person)

TOYRRIFIC, INC

(Firm/ Company)

P.O.Box 823682

(Address)

Pembroke Pines FL 33082

(City/ State and Zip Code)

For further information concerning this matter, please call:

Daniel Fockler

(Name of Contact Person)

at ( 954 ) 680-4898

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☒ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$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

**Street Address**

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

Articles of Amendment  
to  
Articles of Incorporation  
of

TOYRRIFIC, INC.

(Name of corporation as currently filed with the Florida Dept. of State)

P01000086969

(Document number of corporation (if known))

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TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**NEW CORPORATE NAME (if changing):**

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")  
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

**ARTICLE IV Shares The number of shares of stock is:**

Steve Delagdo 25%, Jose Delgado 25%, Alexander Sabonge 25%, Daniel Fockler 25%

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Aricia Morazan President P.O.BOX 720225 MIAMI, FL 33172 will be removed

Steve Delgado President , 15034 sw 21st Miramar FI 33027

Jose Delgado Vice President , 13516 sw 113 ct Miami FI 33176

Daniel Fockler Vice President , 4955 SW 91st Ave Cooper City FL 33328

Alex Sabonge Vice President , 13362 sw 42nd st Miramar 33027

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: 10/2/0006

Effective date if applicable: 10/2/0006  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(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 cast for the amendment(s) was/were sufficient for approval by  
\_\_\_\_\_"  
(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.

Signature

*Allyson, Daniel Frob, Althea Jose A Delgado*  
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Aricia Morazan

(Typed or printed name of person signing)

President

(Title of person signing)

**FILING FEE: \$35**