PD100089301

(Re	questor's Name)	
(Ad	dress)	<u></u>
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(Cit	y/State/Zip/Phone	e #)
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SECRETARY OF STATE
QIVISION OF CORPORATIONS



COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: CNJ ENTERPRE	s PS TWC.
DOCUMENT NUMBER: POLOGO	
Please return all correspondence concerning	g this matter to the following:
Chris tasher N. John	150N
CNJ ENTAPPRISES, INC	
69 Westealo St,	
Albany, New York City/State and Zip Code	12202
C fo has a Called for future annual rep	A R. COM ort notification)
For further information concerning this mat	ter, please call:
Chaistander N. Juhnson Name of Contact Person	at (<u>578) 432 - 335 3</u> Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	nt: Aid 11/09/2011 check 3121
\$35.00 Filing Fee	\$43.75 Filing Fee & Certificate of Status
\$43.75 Filing Fee & Certified Copy	\$52.50 Filing Fee, Certificate of Status & Certified Copy
Madling Address:	Street Address:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.Q-Box 6327	Clifton Building
Tallahassee FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
And the second s	i ananassee, I'L J2JVI

Articles of Amendment to Articles of Incorporation of

CNJ ENTERPRISES,	INC.	
(Name of Corporation as currently filed with the Flo	orida Dept. of State)	١.
P01000089301		
(Document Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, th amendment(s) to its Articles of Incorporation:	is Florida Profit Corporation adopts the following	ng
A. If amending name, enter the new name of the corporation:		
	N/A	
The new name must be distinguishable and contain the word "corporabbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," name must contain the word "chartered," "professional association,"	"Inc," or "Co". A professional corporation	
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A	2
		≦ <u>8</u>
		2 2 2 3
C. Enter new mailing address, if applicable:	- 2	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A ₹	
	//A ==	gs
	, ;; ;; ;; ;; ;; ;; ;; ;; ;; ;; ;; ;; ;;	120
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the	38
Name of New Registered Agent:		
	<i>N/A</i>	
(Florida stree	address)	
New Registered Office Address:	, Florida	
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:	•	
I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.	
Signature of New Registered Ag	ent, if changing	

Page 1 of 4

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	,	Name			<u>ldress</u>	
1) STD		Nemia P.	Jonguil	y Ra	43. F. MARAVIII) wtilla Sabdivis colod City, Thil	ion 3 ippines 6100
2)	,					
3)				- <u>-</u>		
4)						
5)						
6)			······································			
If REMOVIN	NG an office	r and/or director	, please list the (itle(s) and na	me of the officer/director	to be removed:
Title(s)	<u>Name</u>			Title(s)	<u>Name</u>	
1) <u>STO</u>	Rrchelle	Alice Lu	mp Kin	4)		
2)			-	5)		,, <u>, , , , , , , , , , , , , , , , , ,</u>

	s, enter change(s) he de specific)		
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	Page 3 of 4	M []	
		1.41 11	

F.	If an amendment provides for an 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)
	(
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	$\Lambda I/\Lambda$
	/V// / 1
	/
	·
	,
Th	e date of each amendment(s) adoption: December 7, 20//
	t date of each amendmens(s) adoptions
Eff	ective date <u>if applicable</u> :
	(no more than 90 days after amendment file date)
Δd	option of Amendment(s) (CHECK ONE)
AU	option of Amendment(s)
M	The amendment(s) was were adopted 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):
	WThe number of veter cost for the emendment(s) was fivere and finious for annuals
	"The number of votes cast for the amendment(s) was/were sufficient for approval
	by" (voting group)
	(voling group)
	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder
1	action was not required.
_	
,	The amendment(s) was were adopted by the incorporators without shareholder action and shareholder
ŧ	action was not required.
	A /
	Dated December 7, 2011
	20 Ct / //
	Signature Signature
	(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)
	Christopher N. Johnson
	(Typed or printed name of person signing)
	Paeci den T
	(Title of person signing)