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A-R 7/29/09

#### COVER LETTER

TO: Amendment Section **Division of Corporations** Silver Terrace 2, Inc. NAME OF CORPORATION: P01000095410 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Larry Ellerton Name of Contact Person Cantactix Solutions USA Inc. Firm/ Company #131, 90 Hidden Lake Drive Address Sanford, FL 32773 City/ State and Zip Code larry.ellerton@cantactix.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Larry Ellerton Name of Contact Person

☐ \$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**

Enclosed is a check for the following amount made payable to the Florida Department of State:

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

#### Articles of Amendment to Articles of Incorporation of

Articles of Inc	orporation
of	2009 1111
Silver Terrace 2, II	orporation  2009 JUL 27 AM 9: 09  the Florida Dept. of State JLLAHASSEE, FLORID.  ion (if known)
(Name of Corporation as currently filed with	the Florida Dept. of State 12444 STY OF
P01000095410	ASSEE, FLORIE
(Document Number of Corporat	ion (if known)
Pursuant to the provisions of section 607.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>n:</u>
Cantactix Solutions US	A Inc. The new
name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "C name must contain the word "chartered," "professional associ	orp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable:	#131, 90 Hidden Lake Drive
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Sanford, FL 32773
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	#131, 90 Hidden Lake Drive Sanford, FL 32773
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent: William Koiv	<u>u</u>
	ida street address)
Sanford	, Florida <u>32773</u>
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A	
I hereby accept the appointment as registered agent. La <del>m fam</del>	iliar with and accept the <u>obligations</u> of the position.

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)

<u>Title</u>	Name	Address	Type of Action
<u>Dìr</u>	Daniel N. Desmarais	#131, 90 Hidden Lake Drive Sanford, FL 32773	☑ Add □ Remove
Dir	Lawrence G. Ellerton	#131, 90 Hidden Lake Drive Sanford, FL 32773	☑ Add □ Remove
Dir	William Koivu	#131, 90 Hidden Lake Drive Sanford, FL 32773	☑ Add □ Remove
(attach addi	tional sheets, if necessary). (Be specific	;)	
E If an amou	adment provides for an evaluate real	esification or aspellation of ice	und shows
provisions	ndment provides for an exchange, recla for implementing the amendment if no applicable, indicate N/A)		
N/A			

### 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)

<u>Title</u>	Name	Address	Type of Action
PĎ '	Lori Koivu	5393 Shoreline Circle Sanford, FL 32771	
<u>V</u>	Mark Koivu	5393 Shoreline Circle Sanford, Fl. 32771	□ Add ☑ Remove
			_
	nding or adding additional Article: additional sheets, if necessary). (E		
provis (if		nge, reclassification, or cancellation on ment if not contained in the amendm	
N/A			

The date of each amendment(	s) adoption: July 21, 2009
	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 30 days after amenament file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	,,
	(voting group)
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated_July 2	21, 2009
sel	adirector, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Mark Koivu
	(Typed or printed name of person signing)
	Pess/DIR
	(Title of person signing)