(Re	equestor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	,

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COVER LETTER

TO: Amendment Section Division of Corporations

	_{ATION:} <u>L&K GALIE</u> ER: <u></u> P0200001295		ISES INC.
The enclosed Articles of	f Amendment and fee are su	abmitted for filing.	
Please return all corresp	nondence concerning this ma	tter to the following:	
	ROBER	T W. KIDD, CPA	\
	SEABREE	Name of Contact Person ZE BOOKKEEP	
·· .	682 S YON	Firm/ Company NGE STREET	11.00
-	ORMOND	Address BEACH, FL 32 City State and Zip Cod	
For further information		E682@CFL.RR. sed for future annual report se call:	
ROBERT W.	KIDD, CPA	at (386	, 672-6999
Name of	Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□S43.75 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)
Amen Divisi P.O. I	ng Address dment Section fon of Corporations Box 6327 nassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



L&K GALIENO ENTERPRISES INC.

(Name of Corporation :	as currently filed with the Florid	Dept. of State)	
Po:	2000012956		
(Docume	em Number of Corporation (if know	vn)	
Pursuant to the provisions of section 60' its Articles of Incorporation:	7.1006. Florida Statucs, this Florid	la Profit Corporation adopts the follow	ing amendment(s) to
A. If amending name, enter the new r	name of the corporation:		
name must be distinguishable and co "Corp" "Inc" or Co" or the desig word "chartered." "professional associ	nution "Corp." "Inc." or "Co".	company," or "incorporated" or the A professional corporation name mus	The new abbreviation to contain the
B. Enter new principal office address (Principal office address MUST BE A.)			_
C. Enter new mailing address, if apply (Mulling uddress MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new York (May 18 of New Registered Agent)	OFFICE BOX:		-
	3133 WATERWAY	PLACE	
New Registered Office Address:	(Florido street add	Florida 32128	
The second secon	(City)	(Zip Code)	_
New Registered Agent's Signature, if c Thereby accept the appointment as regist Signature	hauging Registered Agents eved agent. I am familiar with and Lacotto gnature of New Registered Agent. if		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a	nd
address of each Officer and/or Director being added:	

(Anach additional sheets, it 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.

Francial	iove, ana sauy smui	n. 5) ás an Add.	
Example: X Change	PT John	<u>Doe</u>	
X Remove	V Mike	Jones	
<u>X</u> Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	VP,S	KITSA P ESPOSITO	3133 WATERWAY PLACE
Add			PORT ORANGE, FL 32128
Remove	•		
2) X Change	P,T	LEO J. GALIEN	3133 WATERWAY RACE BORT ORANGE, FL ZO10
Add			BORT ORANGE, FL 3010
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
s) Change			
Add			
Remove			

an amendment provides for an exchange, reclassification, or cancellation of issued shores, revisions for implementing the amendment if not contained in the amendment itself: (If mit applicable, indicate, N. 3)	penting the amendment if not contained in the amendment itself: indicate N(3)	attach additional sheets, if necessary).	(Be specific)
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		covisions for implementing the amena (if not annitouble, indicate X 4)	dment if not contained in the amendment itself:
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The date of each amendment(s) adoption: 05/15/2013
Effective date if applicable: (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was were adopted by the shareholders. The number of votes east 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
tvoring groups
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 (By a director, parsident of other officer—it 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)
LEO J GALIEN
(Typed or printed name of person signing)
PRESIDENT (Title of person signing)
town a bound,