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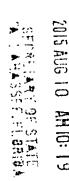
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AUG 12 2015

C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: NAKOVAC INTE	PALI JANOITANA	
DOCUMENT NUMB	ER:		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
		IDA C OVIES	
-		Name of Contact Perso	n
		IDA C OVIES CPA PA	
-		Firm/ Company	
		3785 NW 82 AVE STE 36	02
-		Address	, , , , , , , , , , , , , , , , , , , ,
_		DORAL, FL 33166	
		City/ State and Zip Cod	le
		idaovies@bellsouth.ne	t
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	477-5798
	f Contact Person	at (ode & Daytime Telephone Number
	the following amount made		
■ \$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)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Cliftor	Address dment Section on of Corporations n Building Executive Center Circle
		Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

NAKOVAC INTERNATIONAL I NC

(Name of C	Corporation as currently filed with the Florida Dept. of State)	ي بر
	P04000033927	1 8
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this Florida Profit Corporation adopts the followi	ng amendme
A. If amending name, enter the new nam	e of the corporation;	
		The new
	n the word "corporation," "company," or "incorporated" or the cion "Corp," "Inc," or "Co". A professional corporation name must n," or the abbreviation "P.A."	
B. Enter new principal office address, if a (Principal office address MUST BE A STR		
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF		
D. If amending the registered agent and/o new registered agent and/or the new r	or registered office address in Florida, enter the name of the registered office address:	
Name of New Registered Agent		
_	(Florida street address)	_
New Registered Office Address:	, Florida	
•	(City) (Zip	Code)
New Registered Agent's Signature, if char I hereby accept the appointment as registere	nging Registered Agent: ed agent. I am familiar with and accept the obligations 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)

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 <math>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 Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	D	NAKANO, KEISUKE	126 TURTLE CONE LANE	
X Add			HUNTINGTON, NY 11743	
Remove				
2) Change	D	NAKANO, LUKE	126 TURTLE CONE LANE	
Add			HUNTINGTON, NY 11743	
X Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

. Land duamonus sitees, if itelessury).	ticles, enter change(s) here: (Be specific)
	•
f an amendment provides for an evol	
f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
<u>provisions for implementing the ame</u>	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
<u>provisions for implementing the ame</u>	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
<u>provisions for implementing the ame</u>	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adoption:, if other the date this document was signed.	ın the
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 will not be listed a document's effective date on the Department of State's records.	as the
Adoption of Amendment(s) (CHECK ONE)	
■ 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):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
☐ 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.	
Dated 8/05/15 Signature Vilia Volac	
(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)	
KOVAC, VIERA	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	