P0500002130

(Requestor's Name)				
(Address)				
(Address)				
(Addiess)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Entry Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



500053812515

(\$/06.05--01101--011 **52.50

DS MAY -6 PH 2:27

13 5/16/05 Ame ND

COVER LETTER

TO: Amendment Section Division of Corporations

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF C	ORPORATION: SARADJISHVILI	DISTRIBUTORS, INC.				
DOCUMENT	NUMBER: P05000062130					
The enclosed.	Articles of Amendment and fee are	e submitted for filing.				
Please return a	all correspondence concerning this	matter to the following:				
	KEITH MECCARIELLI					
(Name of Contact Person)						
	(Firm/ Company)					
	100 SOUTH POINTE DR. #3304					
	(/	Address)				
I	MIAMI BEACH, FL 33139					
	(City/ Stat	e/ and Zip Code)				
For further inf	formation concerning this matter, p	lease call:				
KEITH MECCARIELLI		at (561) 305-1967				
(Name of Contact Person)	(Area Code & Daytime	e Telephone Number)			
Enclosed is a c	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)				
Mailing Address		Street Address				

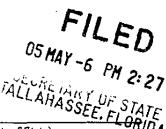
Amendment Section

409 E. Gaines Street

Tallahassee, FL 32399

Division of Corporations

Articles of Amendment to Articles of Incorporation of



SARADJISHVILI DISTRIBUTORS, INC

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

P05000062130							
(Document number of corporation (if known)							
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> 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 VII - INITIAL OFFICERS/DIRECTORS IS BEING AMENDED AND SHOULD NOW READ							
KEITH MECCARIELLI - PRESIDENT/DIRECTOR							
100 SOUTH POINTE DR. #3304							
MIAMI BEACH, FL 33139							
RAY BUCHANAN - VICE PRESIDENT - 100 SOUTH POINTE DR. #3304, MIAMI BEACH, FL 33139							
TAMASHA ROSE - SECRETARY - 412 SW 18TH RD, MIAMI, FL 33129							
ASHLEAY MECCARIELLI - TREASURER - 100 SOUTH POINTE DR. #3304, MIAMI BEACH, FL 33139							
(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: 05/04/2005					
Effective d	late if <u>applicable</u> :				
		(no more than 90 days aft	er amendment file date)		
Adoption o	of Amendment(s)	(CHECK ONE)		
			the shareholders. The number of votes cast for 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 v		ndment(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) washareholder action w	• •	ne incorporators without shareholder action and		
Signed this	4TH day of M	IAY ,	2005		
	selecte		officer - if directors or officers have not been in the hands of a receiver, trustee, or other court iary)		
	KEITH	MECCARIELLI			
(Typed or printed name of person signing)					
	PRES	DENT/DIRECTOR			
	(Title of person signing)				

FILING FEE: \$35