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Sonstate Research Requester's Name  Address  City/State/Zip Phone #	3454	Office Use Only
CORPORATION NAME(S) & DOCUM	MENT NUMBER(S), (if	
1. De Corporation Name)	Corporate (Document #)	con Fre
2. (Corporation Name)	(Document#)	
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Walk in Pick up time  Mail out	Photocopy	Certificate of Status
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS  Amendment  Resignation of R.A  Change of Registe  Dissolution/Withd  Merger	
OTHER FILINGS  Annual Report Fictitious Name	Foreign Limited Partnershi Reinstatement Trademark Other	
CR2E031(7/97)		Examiner's Initials

## · Articles of Amendment to **Articles of Incorporation** of

FILED
2010 JAN 14 PM 2: 24
SECRETARY OF STATE
TALLAHASSEE EL STATE

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Deco Drive Corporation (Name of Corporation as currently filed with the Florida Dept. of State) t.FLORID, P05000090021 (Document Number of Corporation (if known)

owing

	e of the corporation:	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "	the designation "Corp," "Inc,	"company," or "incorporated" or the or "co". A professional corporation
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		Florida, enter the name of the
	egistered office address:	
new registered agent and/or the new re	Nat Naccarat	
new registered agent and/or the new re		Street
new registered agent and/or the new research Name of New Registered Agent:	Nat Naccarat  10711 S W 104 S  (Florida street ad  Miami	Street
new registered agent and/or the new research Name of New Registered Agent:	Nat Naccarat	Street ddress) 33176

Signature of New Registered Agent, if changing

2.

## 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>	<u>Name</u>	Address	Type of Action
PTS	Abdalla Mohamed	890 N W 115 Avenue Plantation Florida 33325	Add Aemove
	ding or adding additional Articles, en additional sheets, if necessary). (Be sp		
provisi	mendment provides for an exchange, ons for implementing the amendment not applicable, indicate N/A)		

The date of each amendment	t(s) adoption: 1-13-2010
	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	are approved by the shareholders through voting groups. The following statement and 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	,,,
	(voting group)
The amendment(s) was/we action was not required.	are adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated 1-	-13-2010
Signature	Que es
(By	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court cointed fiduciary by that fiduciary)
	Mutisim Y, Hagnour (Typed or printed name of person signing)
	Secretary
	(Title of person signing)