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SECRETARY OF STAT

Me Carlo Stron

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: $\underline{\bigvee}\ell$	rizon Properties, Inc.
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and	d fee are submitted for filing.
Please return all correspondence concern	ing this matter to the following:
Rosemarie	Bacallau Esq. (Name of Contact Person)
EFC Mana	(Firm/ Company)
5960 SW 57	(Address)
micensi 4	City/ State and Zip Code)
For further information concerning this no Novemarie Bacall (Name of Contact Person)	at (305) 455 33 6 0 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following am	ount made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Statu	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

Verizon Properties Inc.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts t following amendment(s) to its Articles of Incorporation:	the
A. If amending name, enter the new name of the corporation:	
Veriland Properties Inc.	
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	÷γ 1 1].
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n つ
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent: RUSLWAVIE BUCALLAU	
New Registered Office Address: (Florida street address)	
Mi Com j , Florida 3343 (City) (Zip Code))
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of toposition. Signature of New Registered Agent, if changing	the

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)

Title Address **Type of Action** <u>Name</u> ☐ Add □ Remove ______ 🛄 Add _____ Remove Add □ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an 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)

The date of each amendment(s) adoption: $3/2/09$
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 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 east for the amendment(s) was/were sufficient for approval
by" (voting group)
(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) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated $3/2/09$
Signature (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)
Rosemarie Bala //au (Typed or printed name of person signing)
Director- Secretary (Title of person signing)