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TALLAHASSEE, FLORIDA

SECRETARY OF STATE



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	K S 708 T 1 1 C	Comp. TAIR
NAME OF CORPORATION:	k 5101 151and Cu	ISINE INC
DOCUMENT NUMBER: P060	000051248	
The enclosed Articles of Amendment and for	ee are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
Mark Ja	than ame of Contact Person)	
(Na	ame of Contact Person)	
	(Firm/ Company)	-14-d P ² -
541 GRE	EEN PARK COURT	r
••••••••••••••••••••••••••••••••••••••	(Address)	
OVIEDO	FL 32765 ity/ State and Zip Code)	
For further information concerning this ma		
MARK Jathan (Name of Contact Person)	at (407) 7/6 (Area Code & Daytim	0909 e Telephone Number)
Enclosed is a check for the following amou		
\$35 Filing Fee Securificate 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)
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 C	

Tallahassee, FL 32301

Articles of Amendment

٠	icles of Amendment		TALLAHASSE OF PM 2: 17
Arti	to		Pagor - CD
Artic	eles of Incorporation		TOSECUL 30 PM
	of		TALLARIAN 2:17
Lest Stoc	2 + Sland	Caisine	OSEE TO MAKE
(Name of Corporation as curre	ently filed with the Flor	rida Dept. of Sta	te)
	XXX 51248		
(Document Num	ber of Corporation (if k	inown)	
tursuant to the provisions of section 607.100 ollowing amendment(s) to its Articles of Incorp		s Florida Profit	Corporation adopts the
L. If amending name, enter the new name of	f the corporation:		
incorporated" or the abbreviation "Corp.," (Co". A professional corporation names sociation," or the abbreviation "P.A." B. Enter new principal office address, if apportant of the abbreviation of the principal office address.	e must contain the v	he designation " word "chartered	Corp," "Inc," or I," "professional
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE			
). If amending the registered agent and/or i		ss in Florida and	tor the name of the
new registered agent and/or the new regi		ss in Piorida, em	ter the name of the
Name of New Registered Agent:			
			
New Registered Office Address:	(Florida stre	et address)	_
	2000	.1	_, Florida (Zip Code)
	(City)	y	(Lip Code)
New Registered Agent's Signature, if changi hereby accept the appointment as registered position.		r with and accep	pt the obligations of the
	Signature of New Regist	ered Agent, if cha	unging

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>	Name	Address	Type of Action
	Johnson Eulalee	229 BURNSED PL OVIENO 71 32765	Add Remove
			Add Remove
			Add Remove
(anden dada	itional sheets, if necessary). (Be specific		
provision	endment provides for an exchange, reclass for implementing the amendment if no applicable, indicate N/A)		

The	e date of each amendment(s) adoption: $\frac{10/27/08}{}$
Eff	ective date <u>if applicable</u> : (no more than 90 days after amendment file date)
	(no more than 90 days after amenament file date)
Ade	option of Amendment(s) (CHECK ONE)
K	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" (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 10/27/08
	Signature X
٠	(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)
	MARK Jathan (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)