Division of Corporations Public Access System

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To:

Division of Corporations

From:

Account Name : TRIWARE

Account Number : 120060000125, Phone : (786) 413-4509

: (305)480-7727 Fax Number

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MF SOLUTION CORP

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TAX NOHBUR (305)4/80,7727

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MF 50/	ution corp.	
DOCUMENT NUMBER: P060 C	0111140	
The enclosed Articles of Amendment and foc are s	ubmitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
MERVIS ROOM	driqueg	, .
TRIWARE		<u> </u>
(Firm/C	Company)	
2648 SW 84 AV	suite 209	
	dress) 1	
For further information concerning this matter, plea		
MERVIS Rodnique. (Name of Contact Person)	3 at (786) 413 4 (Area Code & Daytime Tele	509
Enclosed is a check for the following amount:		
\$35 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)
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	

12/14/2006 <i>1</i>	77-11	3054807727

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14/2006	23:11	30548077	27 ,	TRIWARE	1 ₈	TLED (PAGE #	03/04 5 <i>:72 72</i>
		•	Arti	cles of Amendment			11	2 77. 47 ,
			Artic	to cles of Incorporation of	SECRET TALLAHA	ARY OF STA	TE IDA~	
		NF	Soluti	ion corp-				
		(Name of	orporation as	currently filed with the Flo	rida Dept. of	State)		
		ρ	06000	111140				
			(Document n	umber of corporation (if k	nown)			
adopts the	following	g amendme	nt(s) to its A	006, Florida Statutes, t		Profit Corpo	ration	
NEW CO	DRPORA	IE NAME	<u>(if changing</u>	<u>:):</u>				
(Must conta (A profession	in the word onal corpora	"corporation, tion must con	" "company," of tain the word "	or "incorporated" or the ab chartered", "professional a	breviation "Cassociation," o	orp.," "Inc.," or 'or the abbreviation	"Co.") m "P.A.")	
A / A	ALLE TERM	C-1 1 - 1		THAN NAME CHAI d or deleted: (BE SPE	CITITION			
ART	Tide -	v : J	Ini Tià	/ officers	Ocr.	d lor	. dine	TORS
NOE!	PENATO	2648	3 SW 87	OFFICERS AV SUITE 209	MIAMI.	F1 3316	<u>ട</u> ടെയ്ത്	13.744 · 3
Mesi	denT.			• • •				e in a
Anticle	Vr:	The na	ne ano	I Florida STRE	eeT Ada	ness of	- 4	
		•	-	· ·		•		

AMENDMENTS ADOPTED- (OTHER THAN NAME CHAN and/or Article Title(s) being amended, added or deleted: (BE SPEC ARTICLE V: Initial OFFICERS NOEL PENATE 2648 SW 87 AV SUITE 209 President. Anticle VI: The NAME and Florida STRE Registered Agent is: NOEL PENATE 2648 SW 87 AV Suite 209 (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)

FAX # 305 4180 7727

The date of each amendment(s) adoption: 12/06/06	
12/06/06	
Effective date if applicable: 12/06/06 (no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were approved by the shareholders. The number of votes cast the amendment(s) by the shareholders was/were sufficient for approval.	for
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)	
The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	tion
The amendment(s) was/were adopted by the incorporators without shareholder action shareholder action was not required.	and
gradient of the state of the st	
Si-name	
Signature 197 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)	
NOE! PENATE (Typed or printed name of person signing)	
•	
PRESIDENT	
(Title of person signing)	

FILING FEE: \$35