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| (Red | questor's Name) | |
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COVER LETTER

TQ: Amendment Section Division of Corporations

| NAME OF COR | AME OF CORPORATION: NNR ENTERPRIZE INC | | | | |
|--|--|--|--|--|--|
| | | | | | |
| DOCUMENT NU | JMBER: | P0700001303 | 0 | | |
| The enclosed Artic | cles of Amendment and fee a | are submitted for filing. | | | |
| Please return all co | orrespondence concerning th | is matter to the following: | | | |
| | E | DZER RICHARD | | | |
| | 7 | Name of Contact Person | | | |
| | NNI | R ENTERPRIZE,INC | | | |
| | Firm/ Company | | | | |
| | | , ; , ; | | | |
| 13833 WELLINGTON TRACE RD # E4 | | | | | |
| Address | | | | | |
| |) A (C) | LINGTON EL 22444 | | | |
| | | LLINGTON FL 33414 City/ State and Zip Code | <u>, </u> | | |
| | | | | | |
| | ER911(| @COMCAST.NET | | | |
| | E-mail address: (to be use | ed for future annual report notification |) , | | |
| For further inform | ation concerning this matter, | please call: | | | |
| El | OZER RICHARD | at (561) | 502-7736 | | |
| Name | of Contact Person | Area Code & Daytime | Telephone Number | | |
| Enclosed is a chec | k for the following amount n | nade payable to the Florida Dep | artment of State: | | |
| ☑ \$35 Filing Fee | \$43.75 Filing Fee & Certificate of Status | ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | |
| Mailing A | ddress | Street Address | | | |
| Amendment Section | | Amendment Section | | | |
| Division of Corporations | | Division of Corporations | | | |
| P.O. Box 6327 | | Clifton Building | | | |
| P.O. Box 6327 Tallahassee, FL 32314 | | 2661 Executive Center Circle | | | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2009 MAY 19 PM 10: 26

SEGRE LARY OF THE PARTY OF

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

| | ERPRISES, II | | The r |
|--|--------------------------------|-----------------------------|------------------------------|
| name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the aname must contain the word "chartered," "profession | lesignation "Cor | p, " "Inc, " or "(| Co". A professional corporat |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | | | |
| | . <u>-</u> | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | | |
| | | | |
| | - | ٠, | |
|). If amending the registered agent and/or re new registered agent and/or the new regist | | | a, enter the name of the |
| new registered agent and/or the new regist | | | a, enter the name of the |
| | | | a, enter the name of the |
| new registered agent and/or the new regist | ered office addr | | a, enter the name of the |
| new registered agent and/or the new regist Name of New Registered Agent: | ered office addr | <u>ess:</u> | , Florida |
| new registered agent and/or the new regist Name of New Registered Agent: | ered office addr | <u>ess:</u> | |
| new registered agent and/or the new regist Name of New Registered Agent: New Registered Office Address: Lew Registered Agent's Signature, if changing | Florida (City) Registered Age | ess: a street address) ent: | , Florida (Zip Code) |
| Name of New Registered Agent: | Florida (City) Registered Age | ess: a street address) ent: | , Florida (Zip Code) |

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 |
|----------------|--|---|-----------------------|
| <u>P</u> | WILLY ROSIER | 13833 WELLINGTON TRACE R WELLINGTON FL 33414 | ☐ Add ☑ Remove |
| | | | ☐ Add ☐ Remove |
| | | | L Remove |
| | | | ☐ Add ☐ Remove |
| F Ifaman | ling or adding additional Article | os enter change(s) hare | |
| | dditional sheets, if necessary). (| | |
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| | | | |
| <u>provisi</u> | nendment provides for an excha ons for implementing the amend ot applicable, indicate N/A) | nge, reclassification, or cancellation of iss ment if not contained in the amendment i | ued shares, tself: |
| | | | |
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| | | • | |

| The date of each amendmen | t(s) adoption: <u>05/12/2009</u> | | |
|-------------------------------|---|---|--|
| Effective date if applicable: | 05/12/2009 | | |
| | (no more than 90 days after amendment file date) | | |
| Adoption of Amendment(s) | (CHECK ONE) | | |
| | ere adopted by the shareholders. There sufficient for approval. | The number of votes cast for the amendment(s) | |
| | | hrough voting groups. The following statement o vote separately on the amendment(s): | |
| "The number of votes | cast for the amendment(s) was/we | ere sufficient for approval | |
| by | • | " | |
| | (voting group) | | |
| action was not required. | | ors without shareholder action and shareholder ithout shareholder action and shareholder | |
| sele | a director, president or other offi | cer – if directors or officers have not been e hands of a receiver, trustee, or other court | |
| | EDZER | RICHARD | |
| | (Typed or printed na | nme of person signing) | |
| | OFF | FICER | |
| | (Title of person signing) |) | |