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And

JUN 13 2014

R. WHITE

## COVER LETTER

TO: Amendment Section

Division of Corpo	rations		
NAME OF CORPOR	ATION: PAPIRE	Ecycling INC	
DOCUMENT NUMB	ER: P07000	035417	
The enclosed Articles of	of Amendment and fee are su	ubmitted for filing.	
Please return all corres	pondence concerning this mat	atter to the following:	
	_		
-		Name of Contact Person	
	ACCOURTER D	Peuf. Services INC  Firm/Company  1130  Address  FL 34761  City/ State and Zip Code	
-	7(00000	Firm/ Company	
	POBOX	1130	
-		Address	
	DLDEE, 8	FL 34761	
-		City/ State and Zip Code	
•	E-mail address: (to be us	sed for future annual report notification)	
For further information	concerning this matter, pleas	se call:	
F.R		12-12-12-12-12-12-12-12-12-12-12-12-12-1	
	ars	at (407) 656-38F3  Area Code & Daytime Telephone Number	
Ivanie of	Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for	the following amount made p	payable to the Florida Department of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is cnclosed) (Additional Copy is enclosed)	
Amen Divisi	ng Address Idment Section Ion of Corporations Box 6327 Inassee, 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

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address:

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 the position.

Signature of New Registered Agent, if changing

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT John I	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Louis Rendon	17 CHERRY ST Central Istip NY 11722
Add			Central Istip, NY 11722
Remove			
2) Change	UP_	IVAN FROJAS	3552 Creck RUN LN Cosfis, FL 32726
Add			Eusfis, FL 32726
Remove			
3) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	•		
Remove			

tach <i>additional</i> s	lding additional A sheets, if necessary	). (Be specific)				
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n amendment	provides for an ex	change, reclassi	lication, or cane	ellation of issue	d shares.	
ovisions for im	plementing the ar	nendment if not	contained in the	amendment its	elf:	
(if not applied	able, indicate N/A)					
		_				
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		,				
				-		

The date of each amendment(s) adoption: 5/28/2014	, if other than the
date this document was signed.	
Effective date if applicable: 5/28/2014  (no more than 90 days after amendment file date)	_
(no more inan 90 days after amenament 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 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 5/28/2014 Signature Maria alfano	
Signature Maris alfaro	_
(By a/director, president of the 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)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	_