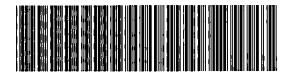
# P07000115797

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



500208196085

500208196085 05/31/11--01041--005 \*\*35.00





#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: SILUPITNO				
DOCUMENT NUMBER: <u>P07000/15797</u>				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Havold R. Havvey Name of Contact Person				
Silup, Inc. Firm/Company				
715 44Th Ave. E.				
Ellenton, Fl. 34222-3  City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Lynne A. Holland at (717) 415-0046  Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee \$\ \text{Certificate of Status}\$\$ Certificate of Status \$\ \text{Calcinial Status}\$\$ Certified Copy (Additional copy is enclosed)\$\$ Certified Copy (Additional Copy is enclosed)\$\$				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building				

2661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment**

Articles of Amendment
Articles of Incorporation of  Siluffuc.  (Name of Corporation as currently filed with the Florida Dept. of State)  Po 7000115797
SILUPTING.
(Name of Corporation as currently filed with the Florida Dept. of State)
P07000115797
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> 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)  1685 615 Ave. S.  57. Petersburg, Fl. 33712.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  Harold R. Harvey  715 44 <sup>th</sup> Ave. E.  Ellerton, Fl. 34222
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: Lynne A. Holland  1685 61 5T Ave. 5.
New Registered Office Address:  (Florida street address)  57. Peters borg, F1. 337/2  (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 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)

Title _	Name	Address	Type of Action
<u>DP</u>	SHAW, BrANDONF.	8270 30th AVE.N ST. PETERSburg, FLORIDA 33710	Add Remove
DVP	DUHAMEL, KELLY	6051 MEdici COUFT #205 SARASOTA, FL 3424	☐ Add ☐ Remove
DP	Harold R. Harvey	715 49Th AVE F.	Add Remove
	nding or adding additional Articles, enter additional sheets, if necessary). (Be specif		
<del></del>			•
F. If an a	amendment provides for an exchange, rec	assification, or cancellation of iss	sued shares,
provis	ions for implementing the amendment if i		
(if	not applicable, indicate N/A)		
<del></del>	<del></del>		

#### 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	<u>Name</u>	<u>Address</u>	Type of Action
DVP	HARVEY, Carol A	715 44Th ave E Ellenton, Fl 34222	Add Remove
******			☐ Add ☐ Remove
·			Add Remove
	ding or adding additional Articles, ente dditional sheets, if necessary). (Be spec		
provisi	mendment provides for an exchange, recons for implementing the amendment in the applicable, indicate N/A)		

The date of each amendment(s) adoption: 5/26/2011				
	(date of adoption is required)  5/26/2011			
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	( <u>CHECK ONE</u> )			
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.			
	re approved by the shareholders through voting groups. The following statemen d 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/we action was not required.	re adopted by the board of directors without shareholder action and shareholder			
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder			
Dated	5/20/2011			
sele	a pirector, president or other officer – if directors or officers have not been cted, by an inforporator – if in the hands of a receiver, trustee, or other court			
арр	ointed fiduciary by that fiduciary)			
	KELLY du HAMEL			
	(Typed or printed name of person signing)			
	DVP			
	(Title of person signing)			