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COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: DECOR	260, INC	
DOCUMENT NUMBER: <u>P07000 127</u>	940	
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
	SALARIDZE Contact Person	
legal Coullett	_	
· .		
2999 NE 1915,	TREET, SUITE 709	
A	ddress	
Aventura, FL	33180	
City/ State	e and Zip Code	
hifitur hotman E-mail address: (to be used for fut	il.com	
E-mail address: (to be used for fut	ure annual report notification)	
For further information concerning this matter, please	call:	
VLADISLAV SALARIDZE a	1(786) 443-2303	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:	
Certificate of Status	\$43.75 Filing Fee & \$52.50 Filing Fee Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	reet Address	
	Amendment Section	
-	Division of Corporations Clifton Building	
	661 Executive Center Circle	

Tallahassee, FL 32301

mendment
corporation
the Florida Dept. of State)
i di
tion (if known)
on:
The r
poration," "company," or "incorporated" or Corp," "Inc," or "Co". A professional corporal iation," or the abbreviation "P.A."
50 S. Pointe Drive Continium TH1 MIAMI BEACH, FL 33139
e address in Florida, enter the name of the
CALAGIORE

Name of New Registered Agent:

VLADISLAV SALARIDZE

2999 NE 191ST STREET, SWITE 709

(Florida street address)

AVENTURA
, Florida 33/80

(City) (Zip Code)

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

	title, name, and address of each Office onal sheets, if necessary)	er and/or Director being added:	
<u>Title</u>	<u>Name</u>	Address	Type of Action
Pr. Agent	SCHWARTZMAN, GARY	L 17201 Collins Avefyn. Surry 15168 Beach,	3 □ Add Remove
	SCHWARTZMAN, GARYL	17201 Collins AVE Unit # 1403 Sunny ISICS BLOCK, FL 33160	☐ Add Remove
<u>Dibector</u>	MARCHENKO, SERGEY	50 S. Pointe Drive Continium TH L MIAMI Blach, FL3316	, ∑ Add . □ Remove
	ng or adding additional Articles, enter itional sheets, if necessary). (Be specif		
-			
provision	ndment provides for an exchange, recl s for implementing the amendment if r applicable, indicate N/A)		
· · · · · · · · · · · · · · · · · · ·			

. If amending the Officers and/or Directors, enter the title and name of each officer/director being

The,date of each amendment(s) adoption:
Effective Jude if annihable	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
,	
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statemen for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(1	voting group) ."
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	9/2010
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
	MARCHENKO, SERGEY (Typed or printed name of person signing)
	DiR ECTOR (Title of person signing)