P08000020071

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	STARKITECT STUDIO	INC	
DOCUMENT N	UMBER:		·	
The enclosed Arti	cles of Amendment and fee	are submitted for filing.		
Please return all c	orrespondence concerning th	is matter to the following:		
		OFER STARK Name of Contact Person		
	1	Name of Contact Person		
STARKI		RKITECT STUDIO INC		
	Firm/ Company			
	4961 SW 34TH TERRACE			
		Address		
	FORT L	AUDERDALE, FL 33312		
		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
	E-mail address: (to be use	tark@gmail.com ed for future annual report notification)		
For further inform	ation concerning this matter,	please call:		
	OFER STARK	at \	90-0005	
	e of Contact Person	Area Code & Daytime Tel	•	
Enclosed is a chec	k for the following amount n	nade payable to the Florida Depart	tment of State:	
☑ \$35 Filing Fee	\$43.75 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 Circl Tallahassee, FL 32301	e	



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 8, 2011

ÖFER STARK STARK DESIGN STUDIO, INC. 4961 SW 34TH TERRACE FT. LAUDERDALE, FL 33312

SUBJECT: STARK DESIGN STUDIO, INC.

Ref. Number: P08000020677

We have received your document for STARK DESIGN STUDIO, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your addocument accordingly.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Rease return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

f you have any questions concerning the filing of your document, please call (850) 245-6964.

lirene Albritton Regulatory Specialist II

Letter Number: 411A00020830

1 SEP 15 AM 8: 00

Articles of Amendment to **Articles of Incorporation**



STARK DES	SIGN STUD	DIO, INC ,		10 10 Mg
(Name of Corporation as curre	ently filed with	the Florida Dep	t. of State)	```&```
(Document Num	ber of Corpora	tion (if known)		
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	5, Florida Statu	ites, this <i>Florida</i>	Profit Corporation	on adopts the followin
A. If amending name, enter the new name of	the corporation	on:		
STARKIT	ECT STUDIO	O INC		The new
name must be distinguishable and contain t abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "proj	designation "C	Corp," "Inc," or	"Co". A professi	porated" or the ional corporation
B. Enter new principal office address, if appl Principal office address <u>MUST BE A STREE</u>		SAME		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		SAME		
D. If amending the registered agent and/or re	egistered office	address in Flori	ida, enter the nar	ne of the
new registered agent and/or the new regis			da, enter the nat	ing of the
Name of New Registered Agent:				
New Registered Office Address:	(Flor	ida street address	·)	
	(City)		, Florida (Zip Code)	

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>-</u>			
E. <u>If amen</u> (a <i>ttach d</i>	ding or adding additional Articles, entaid additional sheets, if necessary). (Be spe	er change(s) here:	
			
provisi	mendment provides for an exchange, root applicable, indicate N/A)		

The date of each amendment	t(s) adoption: SEPTEMBER Z ₁ , 2011
	t(s) adoption: $\frac{\text{SEPTEMBER } Z_{f} \text{ 2011}}{\text{(date of adoption is required)}}$
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more inan 90 days after amenament fite date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	ere adopted by the shareholders. The number of votes cast for the amendment(stere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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)
action was not required. The amendment(s) was/we	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
action was not required. Dated SEF	PTEMBER .2: , 2011
Signature (By sele	
FF	, ,,
	OFER STARK
	(Typed or printed name of person signing)
	President
	(Title of person signing)