P08000026316

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EXAMINER



SANCTUM STAY

(A Trading Division of Equilect Capital Inc – incorporated in Florida

801 SE 16th Ct Fort Lauderdale Florida 33316 PO Box 460655 Ft Lauderdale FL33346 United States of America

Tel: 1-954-594 2727 Fax: 1-954-467-8111 linda@sanctumstay.com nic@sanctumstay.com

Resident Directors Linda J Iverson – RAGFL FAR Nicholas D Iverson ACA BAHA

SE ASIA MARKETING

SINGAPORE

20 Maxwell Road #7-12/14 Maxwell House Singapore 069113 Tel: 65- 6227-7175 Fax: 65- 6227-3275 Resident Director-JPL Wong jplwong@singnet.com.sg

MALAYSIA

Suite A-11-3A
Dataran Palma
Jalan Selaman 1/1
Ampang Point
Kuala Lumpur 68000
Tel 60-3-4270 6822
Fax 60-3 4252-0450
Resident Director-Peter R Gunter
peter@equilectcapital.com

AUSTRALIA

238 The Esplanade-Suite #1
Burleigh Heads
Queensland 4220
Australia
Resident Directors
Campbell J Dumesny
cam@equilectcapital.com
Larissa A Bevan
Ronald K Neville







28th October 2008

Florida Dept of State Amendment Section Div of Corporations P.O. Box 6327 Tallahassee FL.32314

CHANGE OF NAME EQUILECT CAPITAL INC (P08000026316)

We enclose herewith:-

The Articles of Amendment in respect of the "Change of Name" of the abovesaid Corporation.

(The selected name is SANCTUM STAY, CORP)

Dur Cheque in the sum of \$35.00 being the prescribed Filing Fee!

NAME SIMILARITY

We advise:

- 1. That your currently have an "inactive" company on your records under the name "Sanctum Stay Inc"
- 2. That the signatories hereto were the Incorporators of "Sanctum Stay Inc" and that we own the website, www.sanctumstay.com
- 314 That we shall be dissolving the said Sanctum Stay Inc (P07000013383) as the company has never traded nor issued shares.



EQUILECT CAPITAL INC

For 🤲

NICHOLAS D IVERSON DIRECTOR

LINDA J IVERSON
REGISTERED AGENT

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: LQUILECT CAPITAL MC **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) EQUILECT CAPITAL INC.
(Firm/Company) Po-Box 460655 (Address) GAUDERDACE 33346 For further information concerning this matter, please call: NICHOLAS D VERSON at (954) 574 3737

(Area Code & Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & \$52.50 Filing Fee \$35 Filing Fee □\$43.75 Filing Fee & Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (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 Circle
Tallahassee, FL 32301

Articles of Amenda to Articles of Incorpor of (Name of Corporation as currently filed with the Pollowood) (Document Number of Corporation)	ation TRC INC ne Florida Dept. of State)	08 OCT 30 AM 9: 29 SECRETARY OF STATE TALLAHASSEE. FUORIDA
Pursuant to the provisions of section 607.1006, Florida Statute following amendment(s) to its Articles of Incorporation:	es, this <i>Florida Profit Corp</i>	poration adopts the
A. If amending name, enter the new name of the corporation Sawcrum F	i Try Corp	
The new name must be distinguishable and contain the "incorporated" or the abbreviation "Corp.," "Inc.," or Co., "Co". A professional corporation name must contain association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	word "corporation," "co " or the designation "Corp	o," "Inc," or "professional
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add Name of New Registered Agent:		ne name of the
New Registered Office Address: (Floria	la street address)	lorida
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am for position.	(City)	

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
S 14P	BEAVAN LARISSA A	1085 SE 17th St ET LAUSERDALE 33316	_
DR	BEAVAN LARISSA A NEVILLE ROMALO K	1085- SE 17th ST FT LAUDERDALE 33376	_ □ Add _ □ Remove
· ·			_ Add _ Remove
	ding or adding additional Articles, enter dditional sheets, if necessary). (Be speci		
provisio	mendment provides for an exchange, recons for implementing the amendment if ot applicable, indicate N/A)		
· · · · ·			

The date of each amendment(s) adoption:	3/~	Derose	n 2001
Effective date if applicable:			·.
(no more tha	in 90 days after an	nendment file date)	
Adoption of Amendment(s)	CHECK ONE)		
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient f		The number of votes	cast for the amendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each vot			
"The number of votes cast for the an	nendment(s) was/v	were sufficient for app	oroval
by	o)	.,,	
(voting group	<i>າ)</i>		
☐ The amendment(s) was/were adopted by action was not required.	the board of direc	tors without sharehold	der action and shareholder
The amendment(s) was/were adopted by action was not required.	•		ction and shareholder
Dated0\38	108		
Signature	IV.	, ov 27	
selected, by an in-		the hands of a receive	officers have not been r, trustee, or other court
Nicho	198 DAY	in VER.	April
(Typed or printed	name of person signir	ıg)
	(Title of per	ed F	
	(Title of per	son signing)	