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09 NOV 15 PH 2: 40 SECRETARY OF STATE TALLAHASSEE, FIGRID.

Miller

## **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

**Division of Corporations** NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & Certificate of Status ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

2661 Executive Center Circle

Tallahassee, FL 32301

<i>:</i>	Articles of Amendmen	t ·
	to	~ ~ ~
•	Articles of Incorporatio	n Son And
0.1.	of	a Dept. of State
Sterling	Trades Inc	F. 6
(Name of Corporation as curr	ently filed with the Florid	a Dept. of State)
& DAGAT	mn7/.na7	
3) + 0 0 00	beneficially of the	
(Document Nun	nber of Corporation (if kno	wn)
suant to the provisions of section 607.100 endment(s) to its Articles of Incorporation:		lorida Profit Corporation adopts the fol
If amending name, enter the new name o	of the corporation:	
		The new
ne must be distinguishable and contain previation "Corp.," "Inc.," or Co.," or the must contain the word "chartered," "problem to the must contain the must con	ofessional association," or	
reviation "Corp.," "Inc.," or Co.," or the new must contain the word "chartered," "problem must contain the word "chartered," "problem memors and ress, if applicable of the mailing address, if applicable (Mailing address MAY BE A POST OFFI	ofessional association," or olicable: ET ADDRESS )	the abbreviation "P.A."
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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>Address</u>	Type of Action
109 Seminde Lakos Royal Palm Beach, Fil	Add _
	_
er change(s) here:	
eclassification, or cancellation of	ssued shares,
if not contained in the amendmen	<u>t itself:</u>
	***************************************
	er change(s) here: ecific)  eclassification, or cancellation of if not contained in the amendmen

The date of each amendment(s)	adoption: WILLO9
Effective date if applicable:	U u date of adoption is required)
(1	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) sufficient for approval.
The amendment(s) was/were must be separately provided j	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	st for the amendment(s) was/were sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(1	poting 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	Mulag
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 need fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)