PD8000088181

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

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION:	las	
DOCUMENT NUMBER: POS DO	W48181	
The enclosed Articles of Amendment and fee are	e submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
David Con (Name of	Contact Person)	·
	/ Company)	
22415U155+		·
Destifield Bch (City/Stall	FC 33442 te and Zip Code)	······································
For further information concerning this matter, p	lease call:	
Davi 2 Cordova (Name of Contact Person)	at (<u>56/</u>) <u>542</u> (Area Code & Daytime	-/GO Telephone Number)
Enclosed is a check for the following amount ma	de payable to the Florida Dep	artment of State:
\$35 Filing Fee \$\ Certificate of Status	S43.75 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 Cir	rcle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

February 25, 2009

DAVID CORDOVA KIROS INC 2241 SW 15 ST., SUITE 205 DEERFIELD BEACH, FL 33442

SUBJECT: KIROS INC.

Ref. Number: P08000088181

We have received your document for KIROS 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):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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

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

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

Irene Albritton Regulatory Specialist II

Letter Number: 409A00006670

Plans SBR Chingos medo

SECRETARY OF STATE

The common manner of the common of the Contact no if you have grostions,

RECEIVED

Articles of Amendment to' Articles of Incorporation of

UI

KIROS Inc		1	
(Name of Corporation as currently filed with	the Florida Dept. of Stat	te)	
PO9000088181		ېږ	
. (Document Number of Corpora	ation (if known)		
Pursuant to the provisions of section 607,1006, Florida Stat following amendment(s) to its Articles of Incorporation:	cutes, this Florida Profit	Corporation adopts the	
A. If amending name, enter the new name of the corporati	on:		
The new name must be distinguishable and contain the "incorporated" or the abbreviation "Corp.," "Inc.," or Co". A professional corporation name must contain association," or the abbreviation "P.A."	ne word "corporation," o.," or the designation "C	Corp," "Inc," or	
B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS)	Door Hold Bos	St Salto 205 ch, FL	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	33442. SANE AS .49	OUE .	
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:			
New Registered Office Address: (Flo.	rida street address)	, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I amposition.	Agent; i familiar with and accept	the obligations of the	

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
•			Add Remove
			☐ Add
			Add Remove
	nding or adding additional Ar additional sheets, if necessary).		
			
provis	nmendment provides for an extions for implementing the am not applicable, indicate N/A)	change, reclassification, or cancella endment if not contained in the am	tion of issued shares, endment itself:
			
			, , , , , , , , , , , , , , , , , , ,

The date of each amendment(s	a) adoption:
• 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	e 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 statement 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	
(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	2-18-2009
select	director president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court
appoi	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	Prosidont
	(Title of person signing)