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ORE BARY OF STATE
SUCABASSEE, FLORID

Amend Theuris 6-26-09

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: _	ORANGE	Gone	INC.	
DOCUMENT NUMBER:		· · · · ·	_ P	09000007023
The enclosed Articles of Amenda	nent and fee are sub	mitted for filing.		
Please return all correspondence	concerning this matt	er to the following	ng:	
VA	rsha sha	s J -1		
	Name of	Contact Person		
ORAN	he gone in	င		
	Firm	/ Company	-	
9951	KILGORE I	ZOOD Address		
021	City/ Sta	32.85 G te and Zip Code		
	ore plaga @ Idress: (to be used for fu			
For further information concerning			_	
Name of Contact Perso	Մ- 	at (<u>407</u>) Area Code &	876-9 Daytime Telep	797 Ohone Number
Enclosed is a check for the follow				
\$35 Filing Fee \$43.75 Fi Certificat	ling Fee & [e of Status	\$43.75 Filing Fee Certified Copy (Additional copy		\$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	I	Street Address Amendment Sect Division of Corp Clifton Building 2661 Executive C	orations	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	· to			
·	· to Articles of Inco	Nenoration		The state of the s
P	of	n por anon		LED
	OI.			09 JUN 22
ORANGE	Gore :	21+C·		09 JUN 22 PM 3: 52
(Name of Corporation as curre	ntly filed with	the Florida Dept.	of State)	MILANIARY DE CO
🚅 🔭 👾	·	20 / Pa	9000007023	MILAHASSEE, FLORIDA
(Document Num				MOM
Pursuant to the provisions of section 607.1006 imendment(s) to its Articles of Incorporation:	i, Florida Statut	es, this <i>Florida F</i>	Profit Corporation	adopts the following
A. If amending name, enter the new name of	the corporatio	<u>n:</u>		
		4 4		Tri .
name must be distinguishable and contain i	the word "corr	ovation " "comp	any " or "incorno	The new
abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Co	orp," "Inc," or " $($	Co". A profession	al corporation
3. Enter new principal office address, if app	licable:	901	S. ORENG	e eve.
Principal office address <u>MUST BE A STREE</u>	<u>T ADDRESS</u>)	orla	S. ORBING	32805
C. Enter new mailing address, if applicables (Mailing address MAY BE A POST OFFICE)		901 5	S ORMSHE	80E.
		OILLA	NO, R.	32800
D. If amending the registered agent and/or r new registered agent and/or the new regis			da, enter the name	of the
Name of New Registered Agent:	At	BAR GIL	ani	
	901 5	. ORDNGE	OUE.	
New Registered Office Address:		ida street address)		
	ORLAX	Jo6 & .	Elowida	32 8 9 5
	(City)	<u></u>	, Florida (Zip Code)	<u> </u>
	(=,)		()	
New Registered Agent's Signature, if changi				
hereby accept the appointment as registered a			ept the obligations of	of the position.
		-	16.1	
S	ignature of New	Registered Agent	, it 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
tes.v.f K . Tree	VARSHA SHAH	9931 KILGORE 180 02(ANDO, 7432836	☐ Add Remove
041NG # <u>570L</u>	JAYESH PARIFH	3203 LANOTICE PLACE OPLANDO, PL-32836	- □ Add ⊠ Remove
, v. f. L. , 77258	akbone Gilahi	901 S. OPPINGE AVE OPLANSO, 97. 32805	Add Remove
E. If amend	ling or adding additional Articles, ente		
(attach ac	dditional sheets, if necessary). (Be spec	ific)	
			
-			
F. <u>If an an</u>	gendment provides for an exchange, re	classification, or cancellation of iss	ued shares,
<u>provisio</u> (if no	ons for implementing the amendment if ot applicable, indicate N/A)	not contained in the amendment i	tself:
_			

The date of each amendment	(s) adoption:	Jun	4E	200-2009	_
Effective date if applicable:		1HE 210	20	9	_
	(no more than 90 d	ays after amend	ment j	file date)	
Adoption of Amendment(s)	(CHEC	K ONE)			
The amendment(s) was/wer by the shareholders was/we			numb	er of votes cast for the amendme	nt(s)
				oting groups. The following state parately on the amendment(s):	emen
"The number of votes	cast for the amendme	ent(s) was/were	suffic	ient for approval	
by	(voting group)			** 	
	(voting group)				
The amendment(s) was/wer action was not required.	re adopted by the boa	ard of directors	withou	ut shareholder action and shareho	older
The amendment(s) was/wer action was not required.	re adopted by the inc	orporators with	out sh	areholder action and shareholder	
Dated	6/2/09				
Signature	Ju.				_
				irectors or officers have not been of a receiver, trustee, or other cou	
	ointed fiduciary by the		anus C	n a receiver, trustee, or other cou	
	ark	Barl B	يوسا ا	HI.	
	(Typed	or printed name	e of pe	erson signing)	
	Pna	T43015			
		rson signing)			