P09000010569

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ac | ddress) | |
| (Ac | ddress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | usiness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | - |
| | | |
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| | | |
| | | |

Office Use Only



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Amins

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11 SEP 27 AM 9: 02
SECRLYARY OF STATE
NAME AHASSEE, FRORIDA

12000

COVER LETTER

TO: Amendment Section

| Division of Corporat | ions | | |
|---|--|--|---|
| NAME OF CORPORAT | TION: Apol | 110 70 Inc. | |
| DOCUMENT NUMBER | : Po 9 | 000010569 | |
| The enclosed Articles of A | Amendment and fee are | submitted for filing. | |
| Please return all correspor | ndence concerning this i | matter to the following: | |
| | Carmen | Costa ne of Contact Person | |
| | Apollo 70 | Tnc. Firm/ Company | |
| <u>(65)</u> | | Henue, # 120 | |
| | | FL 3314 | |
| | · | or future almual report notification) | |
| For further information co | ncerning this matter, pl | ease call: | |
| Carmen Co | , | at (<u>305</u>) <u>479 -</u> Area Code & Daytime Tel | 0533 |
| Name of Conta | ct Person | Area Code & Daytime Tel | ephone Number |
| Enclosed is a check for the | e following amount mad | le payable to the Florida Depar | tment of State: |
| | 43.75 Filing Fee & ertificate 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 Corpor P.O. Box 6327 Tallahassee, FL 32 | rations | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl | e |

Tallahassee, FL 32301

Articles of Amendment to

| : | | Mark 1 |
|---|--------------------------------|--|
| • | | · |
| ~ | | المارية الماري |
| • | Articles of Amendment to | The state of the s |
| · | Articles of Incorporation | · · · · · · · · · · · · · · · · · · · |
| | of | FILED |
| APOLLO | 40 TNG | Pept. of State) SEP 27 AH 9: 03 |
| (Name of Corporation as curre | ntly filed with the Florida D | Dept. of State) FALCRETADA AM 9: 0 |
| PO 9000 | 010569 | ALLAHASSEE STATE |
| | ber of Corporation (if known) | Dept. of State) FALLAHASSEE, FLORIDA |
| Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation: | , Florida Statutes, this Flori | |
| A. If amending name, enter the new name of | the corporation: | |
| | | The new |
| name must contain the word "chartered," "prof B. Enter new principal office address, if appl (Principal office address MUST BE A STREE) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC | icable: FADDRESS) | donevation 1.A. |
| | | |
| If amending the registered agent and/or renew registered agent and/or the new registered. | | lorida, enter the name of the |
| | tered ville address. | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | (Florida street addr | ress) |
| | | , Florida |
| _ | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing | g Registered Agent | |
| hereby accept the appointment as registered ag | gent. I am familiar with and i | accept the obligations of the position. |
| | | |
| Sij | gnature of New Registered Ag | gent, 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 |
|---------------------------------|---|---|---------------------------------|
| P | Carmen Costa Gigi C. Olah | 6515 Collins Ave # 1204 Mianu Beach, FL | ∴ ☐ Add ☐ ဩ Remove ∠33/4/ |
| <u>P</u> _ | Gigi C. Olah | 6515 Collins Ave. #1204 Miami Beach, FL | Add Remove |
| | | 33 | 4 |
| E. <u>If amene</u> (attach a | ding or adding additional Articles, ented | er change(s) here: | |
| | | | |
| | | | |
| | | | |
| | | | |
| <u>provisi</u> | nendment provides for an exchange, reports for implementing the amendment is of applicable, indicate N/A) | classification, or cancellation of i f not contained in the amendmen | issued shares, t itself: |
| | | | ·· — · — · — — — |
| | | | |
| | | | |

| The date of each amendment | (s) adoption: 9/23/11 |
|---|--|
| | (date of adoption is required) |
| Effective date if applicable: | |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/wer by the shareholders was/we | re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval. |
| | re approved by the shareholders through voting groups. The following statement of 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 |
| bv | |
| - / | (voting group) |
| action was not required. | re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder |
| | 9/23/11 |
| Signature | Carmen Costa |
| sele | a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) |
| | Carmen Costa |
| | (Typed or printed name of person signing) |
| | President |
| | (Title of person signing) |