P090000 23805

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

APPROVED

AUG 0 4 2015.

THEMIEUX

COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	_{n:} MELBOL	IRNE WHOLES	ALE, INC.		
DOCUMENT NUMBER: _	P090000	23805			
The enclosed Articles of Am	endment and fee are su	bmitted for filing.			
Please return all corresponde	nce concerning this ma	tter to the following:			
	DOI	MENIC CALICC	HIA		
	Name of Contact Person				
اا	PROFESSIONAL ACCOUNTING SERVICE				
	Firm/ Company				
1520 BOTTLEBRUSH DR. NE					
Address					
PALM BAY, FL 32905					
		City/ State and Zip Cod	e		
<u> </u>	-mail address: (to be u	sed for future annual report	notification)		
For further information conc	erning this matter inless	se call:			
To future mornation cone	erming this matter, prea-	se cuii.			
	_	at () de & Daytime Telephone Number		
Name of Con	tact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the fo	ollowing amount made	payable to the Florida Dep	artment of State:		
■ \$35 Filing Fee	343,75 Filing Fee & Certificate 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 A	<u>.ddress</u>	Street	Address		
Amendme	nt Section	Amendment Section			
Division o P.O. Box (f Corporations		on of Corporations		
	0327 e Fl 32314	Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

MELBOURNE WHOLESALE, INC.

(Name of Corporation as current)	ly filed with the Flor	rida Dept. of St	ate)		_	
	r of Corporation (if k	nown)			_	
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	orida Statutes, this Fl	orida Profit Coi	<i>rporation</i> ado	pts the followir	ng amendmen	t(s) to
A. If amending name, enter the new name of the	e corporation:					
					_The new	
name must be distinguishable and contain the way "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or word "chartered," "professional association," or way to be a second to the contact of	orp," "Inc," or "Co	o". A professio				
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A					-	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)				-	·
D. If amending the registered agent and/or registered agent and/or the new registered Name of New Registered Agent		s in Florida, en	ter the name	of the	SECRETAR -TALLAHAS:	1. III 3. F.
					RY OF	
	(Florida street	address)			OF STATE	
New Registered Office Address:	(City)	<u> </u>	, Florida	(Zip Code)	TATE DRIDA	ა
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen		h and accept the	obligations o	of the position.		
Signature of	f New Registered Age	ent, 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	RAMI LATIF	1550 WHITMAN DR
Add			W. MELBOURNE
Remove			FL 32904
2) Change			
Add			
Remove			
3) Change		···	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) (Be specific)			
			<u> </u>	
		·- <u>-</u> -		·- <u>·</u>
	·	·		
			-	
				
		 _	<u> </u>	
				<u></u> ,
				· -
f an amendment provides for an exch	amaa waalaasifiaatia	llotion	of issued shares	
i a <u>n amendine</u> nt provides for an excu	ange, reclassification	n, or cancellation ned in the amend	ment itself:	
provisions for implementing the ame	ndment if not contai			
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contai			
provisions for implementing the ame	<u>ndment if not contai</u>	<u> </u>		
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The date of each amendment(s) adoption: _	JULY 16, 2014	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CI	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s) approval.	
	se shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):	
"The number of votes cast for the ame	ndment(s) was/were sufficient for approval	
by	ting group) "	
(vo	ting group)	
The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder	
DatedJULY 16,	2014	
Signature		
	ident or other officer - if directors or officers have not been	
selected, by an incomposited fiduciary	orporator — if in the hands of a receiver, trustee, or other court y by that fiduciary)	
	YUSUF I LATIF	
******	(Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	