P0900040243

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COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: 5/LCOR CORP.

DOCUMENT NUMBER: P09000040243 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SiLvio CORTZ-2

Name of Contact Person SILCOR CORP. 13280 SW 131 STREET. # 109 MIAMI, FL 33186 City/ State and Zip Code hail address: (to boused for Juture annual report of incation) For further information concerning this matter, please call: Si Cvio Contrez at (305) 278-9454

Nome of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & Certified Copy ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address Street Address**

Amendment Section

Taliahassee, FL 32301

Clifton Building

Division of Corporations

2661 Executive Center Circle

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida De POPOOO 40243 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida	ept. of State)
(Document Number of Corporation (if known)	
• • • • • • • • • • • • • • • • • • • •	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i>	
mendment(s) to its Articles of Incorporation:	a Profit Corporation adopts the following
Stunt R. Chick, Inc.	The new
ame must be distinguishable and contain the word "corporation," "cor bbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ame must contain the word "chartered," "professional association," or the a	r "Co". A professional corporation
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	FILED MAY 22 PM 12: 49 CRE JAN OF STATE LAHASSEE, FLORIDA
. If amending the registered agent and/or registered office address in Flonew registered agent and/or the new registered office address:	rida, enter the name of the
Name of New Registered Agent:	
New Registered Office Address: (Florida street addre	rss)
	, Florida
(City)	(Zip Code)

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 Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendment(s) adoption: 5/18/09
Effective date if applicable: 1/8/09 (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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
by" (voting group)
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated_5/18/09
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
SILVIO CORTEZ
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)