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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: STORE 4 YOU, INC.	
DOCUMENT NUMBER: P09000044514	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
	. •
DMITRIY POLYAKOV, CPA	
Name of Contact Person	
S&P TAX SOLUTIONS, LTD.	
Firm/ Company	
141 REVERE DR.	
Address	
NORTHBROOK, IL 60062	
City/ State and Zip Code	
info@sandptax.com E-mail address: (to be used for future annual report notification)	
E mail address. (to be deed for facility arms at report notine and	
For further information concerning this matter, please call:	
DMITRIY POLYAKOV, CPA at (847) 480-4400	
Name of Contact Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of Sta	te:
\$35 Filing Fee \$43.75 Filing Fee \$ \$43.75 Filing Fee \$ \$52.50 Filing Fee \$ Certificate of Status (Additional copy is enclosed) \$52.50 Filing Fee \$ Certificate of Status (Additional copy is enclosed) \$60.00 Certificate of Status (Additional Copy is enclosed)	sed)

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 Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

STORE 4 YOU, INC.		The state of the s	19 1 1/2 2 1
(Name of Corporation as cu	rrently filed with the Flor	<u>'lda Dept. of State)</u> ਂ	894 B
			1. 1350 m
P09000044514			
(Document Nu	mber of Corporation (if known	own)	
Pursuant to the provisions of section 607.1006, Flo	orida Statutes, this <i>Florida</i>	Profit Corporation	adopts the
following amendment(s) to its Articles of Incorporate	tion:		• •
A. If amending name, enter the new name of the	e corporation:		
			e new
name must be distinguishable and contain the work			
abbreviation "Corp.," "Inc.," or "Co.," or the designs			ration
name must contain the word "chartered," "profession	onal association," or the al	bbreviation "P.A."	
B. Enter new principal office address, if applica		1	
(Principal office address MUST BE A STREET A	<u> </u>		
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE B	3OX)		
		1	
D. If amending the registered agent and/or reg	-	<u>Florida, enter the n</u>	ame of the
new registered agent and/or the new registe	red office address:	·	
Name of New Registered Agent:			
New Registered Office Address:	(Florida street ad	dress)	
		pm) =1.	1_
	(City)	, Floric	ia Zip Code)
	(Oity)	(zip oou o j
Name Danistana d Amende Olamatana 18 aliana tan	Designational Assesseds		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			
т петеру ассерт the appointment as registered age	nı. ı am ramılar with and a	ісс о рі іне opligations	or tri o position.

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>	Name	<u>Address</u>	Type of Action
PRESIDENT	ALINA MOGILEVSKY	1956 TARPON BAY DR. N	
		NAPLES, FL 34119	X Remove
PRESIDENT	FELIX MOGILEVSKY	1956 TARPON BAY DR. N	X Add
	•	NAPLES, FL 34119	Remove
,	•		• .
\$ <u></u>		- to the second	Add
			Remove
			<u> </u>
	g or adding additional Articles, enter cha itional sheets, if necessary). (Be specific)	nge(s) nere:	
	morial checks, it ricoussally). (20 opening)		
			· · · · · · · · · · · · · · · · · · ·
		14	
	dment provides for an exchange, reclass for implementing the amendment if not c		
	licable, indicate N/A)		
			
* "			
		,	
-		· ·	

T STORE 4 YOU, INC.	. 27-0492856 ATX
The date of each amendment(s) adoption	
Pffeetive date if applicables	(date of adoption is required)
Effective date <u>if applicable</u> : (no more	than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
Adoption of Amendment(s)	(OHEON ONE)
X The amendment(s) was/were adopte by the shareholders was/were sufficient	d by the shareholders. The number of votes cast for the amendment(s) ent for approval.
	nd by the shareholders through voting groups. The following statement of voting group entitled to vote separately on the amendment(s):
"The number of votes cast for t	he amendment(s) was/were sufficient for approval
by	,"
(votin	g group)
The amendment(s) was/were adopte action was not required.	d by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and shareholder
Dated	6/8/2010
Signature	
selected, by	or, president or other officer – If directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)
FELIX MO	OGILEVSKY
	(Typed or printed name of person signing)
PRESIDE	ENT (Title of person signing)
	() NO DE 2011 2 NATIO (1)