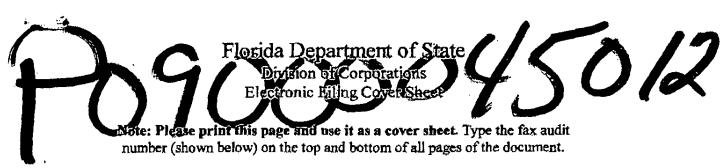
3052201440

LAZARUS

PAGE 01/04 nups://ctrie.sumbiz.org/scripts/efflcovr.ex



(((H10000245106 3)))



H100002451063ABCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE

Account Number: I20000000019 Phone : (305)552-5973 Fax Number : (305)220-1440

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN TRI-DELTA, INC.

Certificate of Status Certified Copy Page Count 04 **Estimated Charge** \$35.00

Electronic Filing Menu

Corporate Filing Menu

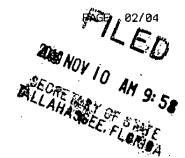
Help

2.53

LAZARUS

H10000245106

Articles of Amondment Articles of Incorporation



TRI-DELTA, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
70900045012
(Document Number of Corporation (if known)

·	The :
abbreviation "Corp.," "Inc.," or Co.," or th	n the word "corporation," "company," or "incorporated" or he designation "Corp," "Inc," or "Co". A professional corpora rofessional association," or the abbreviation "P.A."
B. <u>Enter new principal office address, if ap</u> (Principal office address <u>MUST BE A STRE</u>	pplicable: EET ADDRESS)
C. Enter new mailing address, if applicabl (Mailing address MAY BE A POST OFF	le: TCE BOX)
D. If amending the registered agent and/or new registered agent and/or the new re	r registered office address in Florida, enter the name of the gistered office address:
D. If amending the registered agent and/or new registered agent and/or the new registered Agent:	r registered office address in Florida, enter the name of the gistered office address:
new registered agent and/or the new re	r registered office address in Florida, enter the name of the gistered office address: (Florida street address)
new registered agent and/or the new res	gistered office address:

Signature of New Registered Agent, if changing

Page 1 of 3

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)

3052201440

Title	Name	<u>Address</u>	Type of Action
Y15	Chistina' calcomure	DON 10th Street Miami Beach FL33	Add D Remove
			□ Add □ Remove
			☐ Add ☐ Remove
(attach add	itional sheets, if necessary). (Be specifi	(6)	
provision	endment provides for an exchange, recise for implementing the amendment if supplicable, indicate N/A)	assification, or cancellation of la not contained in the amendment i	ared shares. iself:

Page 2 of 3

→
The date of each amendment(s) adoption: O O U O
The date of each amendment(s) anoption: _/
Effective data if applicable: 10 · 0 · 1
(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(by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statements 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)
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 10 . 04 . 10
Signature V Committee (1)
(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)
Mae Comenares (Typed or printed name of person signing)
(Lyped or printed name or person signing)
Drechn
7Ttila afanna sisminal

Page 3 of 3