P09000049058

(Re	questor's Name)	
(Ad	dress)	
— (Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section

Division of Corporations	•	•	
NAME OF CORPORATION:SSKAR			
DOCUMENT NUMBER: Po 90000	49058		
The enclosed Articles of Amendment and fee a	are submitted for filing.		
Please return all correspondence concerning th	is matter to the following:		
EMMAN	Name of Contact/Person		
,	Name of Contact/Person		
SS_K,	ARTUNER INC		
	Firm/ Company		
3301 Span	wh Moss Ferrace C	unt 209	
Fort Inuders	Lity/ State and Zip Code		
E-mail address: (to be use	d for future annual report notification	:	
For further information concerning this matter,	please call:		
EMMANUE / N/S/CV	at (954) 638-5	148	
Name of Contact Person	at (<u>954</u>) <u>638-5.</u> Area Code & Daytime Tele	ephone Number	
Enclosed is a check for the following amount n	nade payable to the Florida Depart	ment of State:	
\$35 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 Address	Street Address		
Amendment Section	Amendment Section		
Division of Corporations	•	Division of Corporations	
P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	5	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Of SS KARTINER INC (Name of Corporation as currently filed with the Florida Dept. of State) (Name of Corporation as currently filed with the Florida Dept. of State)
(Name of Corporation as currently filed with the Florida Dept. of State)
PO 90000 49058 STORE
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the
abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable: 3301 Spanish moss te crace
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Tot Sou du dale F2.
_33319
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 3301 SpanSl moss terrace unit 209
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 3301 Spanish moss terrace unit 209 Fort Loude Volle FL 33319
D. If amonding the projectored arout and/an assistant of Six address in Florida.
D. <u>If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:</u>
Name of New Registered Agent: EMMANUEL VOICY
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: (Florida street address) TT 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
New Registered Office Address: (Florida street address) unit 209 32314
(City) (Zip Code)
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.

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>	<u>Address</u>	Type of Action
ρ_	Stanley SOUFFRANT		
~	Stanley SoufFRANT Antoinette AlFRED		——————————————————————————————————————
	HINDIAPICE FILLES		
			☐ Add☐ Remove
	nding or adding additional Articles, ente additional sheets, if necessary). (Be spec		
Adress	Change: 3301 Spa	rash Hoss to	sonee Labe FL
 	•	Fort Sou don	tale FL
	<u>zif. 33319</u>		
	mendment provides for an exchange, re		
	ions for implementing the amendment if not applicable, indicate N/A)	not contained in the ame	endment itself:
(9)	пол аррисионе, таксине тлу		
<u> </u>			
			

The date of each amendment	(s) adoption: 6 1-10
	(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)
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 d for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	east for the amendment(s) was/were sufficient for approval
by	
	(voting group)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	6-1-10
selec	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 binted fiduciary by that fiduciary)
	(Typed or printed name of person signing)