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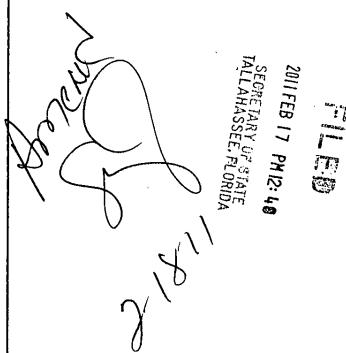
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION:	EXPRESS TAX CORP	
DOCUMENT NU	JMBER:	P09000066442	
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
		SERGE DOUYON	
		Vame of Contact Person	
	EX	PRESS TAX CORP	
		Firm/ Company	
	434	9 10TH AVE NORTH	
		Address	
City		E WORTH, FL,33461	
		ity/ State and Zip Code	
	SERGED2 E-mail address: (to be use	20@HOTMAIL.COM d for future annual report notification)	
For further informa	ation concerning this matter,	please call:	
SE	ERGE DOUYON	at (561) 304-4912	
Name	of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a chec	k for the following amount n	nade payable to the Florida Department of State:	
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enc	closed)
Mailing A		Street Address	
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		Clifton Building	
Tallahassee FL 32314		2661 Evecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



EXPRESS TAX CORP	144867 Ox
(Name of Corporation as currently filed with the Florida Dept. of State)	SEE, FIGA
D00000066442	CORIL

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following

name must be distinguishable and conta abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "	the designation "Corp," "Inc," or "Co".	A professional corporation
B. Enter new principal office address, if a (Principal office address)		
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF	FFICE BOX)	
D. If amending the registered agent and/	<u>or registered office address in Florida, e</u> registered office address:	nter the name of the
new registered agent and/or the new r		
Name of New Registered Agent:	SERGE DOUYON	
		ť
Name of New Registered Agent:	SERGE DOUYON 4349 10TH AVE NORTH (Florida street address)	 Florida FL,33461
Name of New Registered Agent:	SERGE DOUYON 4349 10TH AVE NORTH (Florida street address)	, Florida <u>FL,33461</u> Zip Code)

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
P	SERGE DOUYON	4349 10TH AVE NORTH LAKE WORTH,FL.33461	
	dditional sheets, if necessary). (Be		
provisio		e, reclassification, or cancellation of nt if not contained in the amendmen	

The date of each amendmen	t(s) adoption: <u>02</u>	2/15/2011
Effective date <u>if applicable</u> :	02/15/2011	(date of adoption is required)
•	(no more than 9	00 days after amendment file date)
Adoption of Amendment(s)	(<u>CH</u>	IECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes cast for the amendment(s) approval.
		ne shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amen	dment(s) was/were sufficient for approval
by	(voting group)	.,,,
	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the	board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the	incorporators without shareholder action and shareholder
Dated_02/1	5/2011	
sele	Shoel y a director, presidenced, by an incorpointed fiduciary l	dent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		SERGE DOUYON
	(Ту	ped or printed name of person signing)
		PRESIDENT
	(Title o	f person signing)