

P090000916979

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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R. WHITE

FILED
13 OCT 29 PM 12:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CHRISTOPHER P. KELLEY, P.A.

ATTORNEY AT LAW
11098 BISCAYNE BOULEVARD
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MIAMI, FLORIDA 33161

TELEPHONE (305) 893-6004
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EMAIL ADDRESS
INFO@CPKLAWPA.COM

October 22, 2013

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

VIA FEDERAL EXPRESS
AIRBILL NO. 8989 3729 6965

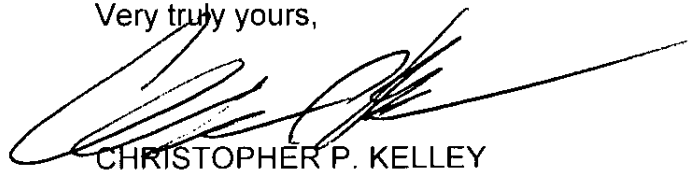
RE: AMENDMENT TO ANNUAL REPORT (PROFIT)
DECEMBER, INC.
DOCUMENT NO. P09000096979

Dear Madam or Sir:

Enclosed is my firm's check for **\$35.00** to file the **Articles of Amendment of DECEMBER, INC.**, changing the Annual Report to reflect new **Registered Agent** and **Officers/Directors** of the corporation

Please contact me should you have any questions.

Very truly yours,



CHRISTOPHER P. KELLEY

CPK:rd
Enclosures
Amendment Fee \$35.00

Articles of Amendment
to
Articles of Incorporation
of

FILED

13 OCT 29 PM 12:24

DECEMBER, INC., a Florida corporation

(Name of Corporation as currently filed with the Florida Dept. of State)

P09000096979

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

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 name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

N/A

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

N/A

D. 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:

Name of New Registered Agent

SAJID ZUBAIR

14763 NORTH MIAMI AVENUE

(Florida street address)

New Registered Office Address:

NORTH MIAMI

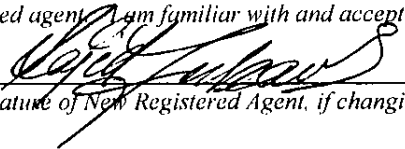
(City)

, Florida 33168-4949

(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.


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)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

X Change PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ☒ Change	<u>PTSD</u>	<u>ABDUL GHAFOOR</u>	<u>4547 SW 129 Avenue</u>
☐ Add			<u>Miramar, FL 33027</u>
☐ Remove			
2) ☐ Change	<u>VS</u>	<u>RAJESH G. TIRTHANI</u>	<u>1750 NE 191 Street</u>
☐ Add			<u>#323F</u>
☒ Remove			<u>N. Miami Beach, FL 33179</u>
3) ☐ Change	<u>VD</u>	<u>SAJID ZUBAIR</u>	<u>11770 SW 9 Street</u>
☒ Add			<u>Pembroke Pines, FL 33025</u>
☐ Remove			
4) ☐ Change			
☐ Add			
☐ Remove			
5) ☐ Change			
☐ Add			
☐ Remove			
6) ☐ Change			
☐ Add			
☐ Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

N/A

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)

N/A

The date of each amendment(s) adoption: October 4, 2013, if other than the date this document was signed.

Effective date if applicable: _____
(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)

☐ 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 10/28/13

Signature

Abdul Ghafoor

(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)

ABDUL GHAFUOR

(Typed or printed name of person signing)

President/Secretary/Treasurer

(Title of person signing)

Articles of Amendment
to
Articles of Incorporation
of

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SECRETARY OF STATE,
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(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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Name of New Registered Agent SAJID ZUBAIR

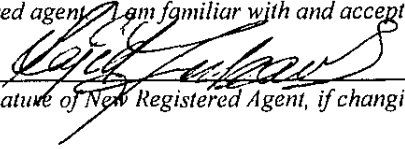
14763 NORTH MIAMI AVENUE

(Florida street address)

New Registered Office Address: NORTH MIAMI, Florida 33168-4949
(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.


Signature of New Registered Agent, if changing

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

N/A

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(if not applicable, indicate N/A)

N/A

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Dated 10/28/13

Signature Abdul Ghafoor
(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)

ABDUL GHAFOOR

(Typed or printed name of person signing)

President/Secretary/Treasurer

(Title of person signing)