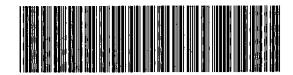
18900100999

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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12/12/11--01001--021 **35.00



Cry Slisen

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: TYIPH	IMPACH WI	nbows inc
DOCUMENT NUMBEI	R:		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ndence concerning this ma	tter to the following:	
	Sovol Ma	144nez	
	THEY IME	ame of Contact Person	, inc
	18840 NU	Firm/Company 57 AVC #	201
	HIGHAM FI	Address 33015	
<u>+</u>	YIPH IMPORT	ty/ State and Zip Code WWW DOWN Sed for future annual report	Inotification)
For further information co	oncerning this matter, plea	se call:	
JESSICUTON	RS	at (78 C	,4190213
Name of C	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for th	e following amount made	payable to the Florida Dep	artment of State:
\$35 Filing Fee	□\$43.75 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

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

$\underline{Street\ Address}$

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

•		uj ast fil S	
Articles of Amend	ment		
Articles of Incorpor	eation	10	
of a	Hion		_
TYIDH IMDOCH WINDS	WS Inc	12	
(Name of Corporation as currently filed with the F	lorida Dept. of State)	- 유유 교	<u>יי</u>
		<u>57</u> ₩	
(Document Number of Corporation (if	fknown)		
Pursuant to the provisions of section 607.1006, Florida Statutes, that amendment(s) to its Articles of Incorporation:	nis <i>Florida Profit Corporatio</i>	n adopts the following	5
A. If amending name, enter the new name of the corporation:			
The new name must be distinguishable and contain the word "corporabbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.,"	"Inc," or "Co". A profession		
name must contain the word "chartered." "professional association,	or the abbreviation "P.A."	7 11 10 1400	.)
B. Enter new principal office address, if applicable:	18840 MD	1 AVC#20) [
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	HIGHON, FI	23015	
C. Enter new mailing address, if applicable:	00000		
(Mailing address MAY BE A POST OFFICE BOX)	18810 DM 5	7 <u>AVC#</u> 2())
	Hatean, Fi	33015	
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:		e of the	
Name of New Registered Agent:			
Nume of New Registered Igent.			
(Florida stre	et address)		
	er accareasy		
New Registered Office Address: (City)	, Florida	(Zip Code)	
(Cily)		(sup County)	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations	of the position.	
Signature of New Registered A	gent, if changing		

the record to b	e. Please indicate the title(s), name and a	ddress for e	ach officer/director.
(Our database	can index up to 6 officers/directors. If ye	ou have moi	re than 6 officers/directors, please list them on
additional sheet Title(s)			Address
1) 💆	Will Hartine.	2	18840 NW 57AVC#201 Halcahifi 33015
2) 10	MEMOCHOR	YP.	4183 E 10 St +Halean + 133013
3) <u>SEC</u>	JESSICU TOMES		18840 NW57AVC#201 HIAICAN I FI 33015
4)			
5)			
6)	<u></u>	 ,	
If REMOVING	G an officer and/or director, please list the	title(s) and	name of the officer/director to be removed:
Title(s)	Name_ Al	Title(s)	<u>Name</u>
1) 💆	potael Gonzalez	4)	
2)		5)	
3)		6)	

. If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want

an

E. If amending or adding additional Arti (attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
-	
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	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·

provisions for	nent provides for an exchange, reclassification, or cancellation of issued shares, r implementing the amendment if not contained in the amendment itself:
(if not app	olicable, indicate N/A)
	NA
	
The date of each :	amendment(s) adoption: 127/1
Effective date <u>if a</u>	pplicable:
	(no more than 90 days after amendment file date)
	A CONTROL ON TO
Adoption of Ame	ndment(s) (CHECK ONE)
	at(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s)
by the shareno	lders was/were sufficient for approval.
	at(s) was/were approved by the shareholders through voting groups. The following statement ately provided for each voting group entitled to vote separately on the amendment(s):
	ber of votes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
-	(voting group)
The amendmen action was not a	et(s) was/were adopted by the board of directors without shareholder action and shareholder required.
☐ The amendmen action was not r	t(s) was/were adopted by the incorporators without shareholder action and shareholder required.
ī	Dated 12/7) 11
,	1.1200
Ş	Signature
	(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)
	JACKIMI TAMPE
	(Typed or printed name of person signing)
	$\sim \sim 1/10^{-1}$ CM = 1
	SPCIETURY
	(Title of personsigning)