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## **COVER LETTER**

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION: Un	ounk Inc.	
DOCUMENT NUMBER: PO90	0103294	
The enclosed Articles of Amendment and fe	ee are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	1
Bryon	Ran Kin	
	Available Comment and in	
Unsu	ハK エハC. Firm/ Company	
	Sandestin Lane #62 Address	<u>/</u>
Miran	nar Beach FL 3 City/ State and Zip Code	2550
	Kineyahoo.com used for future annual report notification)	
For Single and Comment of the second of the second	,	1
For further information concerning this matt		1
Bryon Rankin Name of Contact Person	at ( <u>856</u> ) <u>225 -</u> Area Code & Daytime Tel	1453 Jephone Number
Enclosed is a check for the following amour	nt made payable to the Florida Depar	tment of State:
\$35 Filing Fee \$\sum \\$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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ.	

Tallahassee, FL 32301

## **Articles of Amendment** to **Articles of Incorporation**

Name of Corporation as currently filed with the Florida Dept. of State 21 PM 12: 49  POGODO 03294  (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:  Premium Office Care Inc.  The new name must be distinguishable and contain, the word "corporation." "company," or-"incorporated" or the abbreviation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "PA."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  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:  New Registered Office Address:  (Florida street address)	Vi	
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New Registered Office Address: (Florida street address)		
New Registered Office Address: (Florida street address)	Name of New Praintaged Agents	
	Name of New Registered Agent.	
		<u> </u>
	New Registered Office Address: (Flor	ida street address)
		Florida

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:

(City)

Signature of New Registered Agent, if changing

(Zip Code)

## removed and title, name, and address of each Officer and/or Director being added: (Allach additional sheets, if necessary) Name Address **Type of Action** ☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)

If amending the Officers and/or Directors, enter the title and name of each officer/director being

The date of each amendment(s) ad	loption:
Effective date if applicable:	(date of adoption is required)
(no	more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	or the amendment(s) was/were sufficient for approval
by By (voti	ng group)
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated7	- 18-10
Signature	Bryon lanks
	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court
	d fiduciary by that fiduciary)
	7 0 4
	(Typed or printed name of person signing)
	(c) ben or bennes are benness as benness.
	President (Title of person signing)
The state of the s	- (Title of person signing)