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| . PICK-UP WAIT MAIL |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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SECRETARY OF STATE



C/W

THANK YOU

WOULD APPRECIATE IF THIS COULD BE SORT OF EXPEDITED AS THE ORIGINAL

NAME OF

900 SUNRISE LANE INC WOULD NOT

ALLOW A NEW EIN NUMBER, THEREFORE

A CHANGE OF INC TO CORPORATION HAD

TO BE MADE TO COMMENCE BUSINESS

WITH THE BANK

THANK YOU AGAIN FOR YOUR

CO-OPERATION ALVIN ROTH

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | DRATION: | 900 Sunrise Lane Inc | |
|--|----------------------------|--|---|
| DOCUMENT NUM | 1BER: | P10000008059 | |
| The enclosed Article | s of Amendment and fee a | re submitted for filing. | |
| Please return all corr | espondence concerning thi | s matter to the following: | |
| | | Alvin N Roth | |
| | . N | lame of Contact Person | |
| | L | iaison Consultant | |
| | | Firm/ Company | |
| | | P. O. Box 11913 | |
| | | Address | |
| _ | | uderdale,Florida 33339 | |
| | | ity/ State and Zip Code | |
| | E-mail address: (to be use | sultant@live.com d for future annual report notification) | |
| For further informati | on concerning this matter, | please call: | |
| | Alvin N Roth | | 70-8401 |
| Name o | Contact Person | Area Code & Daytime Te | lephone Number |
| Enclosed is a check | for the following amount n | nade payable to the Florida Depar | tment 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 Amendment Section Division of Corporations P.O. Box 6327 | | Street Address Amendment Section Division of Corporations Clifton Building | |
| Tallahassee, FL 32314 | | 2661 Executive Center Circ | ie |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

900 Sunrise Lane Inc (Name of Corporation as currently filed with the Florida Dept. of State) P1000008059

(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:

| 900 St | unrise Lane Corporation | The ne |
|---|--|---|
| abbreviation "Corp.," "Inc.," or Co.," o. | anrise Lane Corporation," "company," or ain the word "corporation," "company," or r the designation "Corp," "Inc," or "Co". A "professional association," or the abbreviation | professional corporation |
| 3. Enter new principal office address, if | f applicable: | |
| Principal office address <u>MUST BE A ST</u> | | |
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| C. Enter new mailing address, if applic | | |
| (Muiling address <u>MAY BE A POST ()</u> | PFFICE BOX) | |
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| N. If amount is so the amount of a second or a | 2/ | the name of the |
| | Nor registered office address in Florida, enter | the name of the |
| D. If amending the registered agent and new registered agent and/or the new | | the name of the |
| | | the name of the |
| new registered agent and/or the new | | the name of the |
| new registered agent and/or the new | | the name of the |
| new registered agent and/or the new Name of New Registered Agent: | registered office address: (Florida street address) | |
| new registered agent and/or the new Name of New Registered Agent: | registered office address: (Florida street address) | Florida |
| new registered agent and/or the new Name of New Registered Agent: | registered office address: (Florida street address) | Florida |
| new registered agent and/or the new Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if ch | (Florida street address) (City) (Zip Canging Registered Agent: | Florida Code) |
| new registered agent and/or the new Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if ch | (Florida street address) (City) (Zip (| Florida Code) |
| new registered agent and/or the new Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if ch | (Florida street address) (City) (Zip Canging Registered Agent: | Florida Code) |
| new registered agent and/or the new Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if ch | (Florida street address) (City) (Zip Canging Registered Agent: | Florida Code) Digations of the position |

Page 1 of 3

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| | amandment arguides for an evel | ange, reclassification, or cancellation of issued shares, |
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| provi: | sions for implementing the amend | dment if not contained in the amendment itself: |
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| The date of each amendmen | t(s) adoption: February 9,2010 |
|--|---|
| Effective date <u>if applicable:</u> | (date of adoption is required) |
| Enterve date in applicable. | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| | ere adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval. |
| | ere approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s): |
| "The number of votes | east for the amendment(s) was/were sufficient for approval |
| by | ." |
| | (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_Feb | ruary 9, 2010 |
| sele | r a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) |
| | Lawrence Wolfe |
| | (Typed or printed name of person signing) |
| · | Secretary |
| | (Title of person signing) |