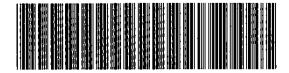
Paren 973/

(Re	questor's Name)	-
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	······································



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Mary 1



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	IE OF CORPORATION: WPCODER, INC.		
DOCUMENT N	NUMBER: P10000009731		
The enclosed Arti	cles of Amendment and fee a	are submitted for filing.	
Please return all c	orrespondence concerning th	is matter to the following:	
	Dora Brande		
	Name of Contact Person		
		Firm/ Company	
	9825 S.W. 80 DRIVE Address		
	MIAMI, FL 33173		
		City/ State and Zip Code	
	DoraB E-mail address: (to be use	Brande@aol.com ad for future annual report notification)	
For further inform	ation concerning this matter,	please call:	
Name	Dora Brande e of Contact Person	at (<u>305</u>) <u>5</u> Area Code & Daytime Tel	96-2460 lephone Number
Enclosed is a chec	k for the following amount m	nade payable to the Florida Depar	tment of State:
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status		\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301	le

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

WPCODER, INC.

	Articles of Amendment	and the state of t
•	to	Dept. of State)
	Articles of Incorporation	SEP
	of	TATELL S AM
W	/PCODER, INC.	<u> </u>
(Name of Corporation as	currently filed with the Florida	Dept. of State)
	P10000009731	
(Document	Number of Corporation (if known	n)
rsuant to the provisions of section 607 endment(s) to its Articles of Incorporati		rida Profit Corporation adopts the following
If amending name, enter the new na	me of the corporation:	
ne must contain the word "chartered," Enter new principal office address, if incipal office address MUST BE A ST	f applicable:	e aboreviation F.A.
Enter new mailing address, if applic (Mailing address MAY BE A POST O	FFICE BOX)	
(Mailing address <u>MAY BE A POST O</u>	Nor registered office address in I	Florida, enter the name of the
(Mailing address MAY BE A POST O	Nor registered office address in I	Florida, enter the name of the
(Mailing address MAY BE A POST O	Mor registered office address in I registered office address:	Florida, enter the name of the
(Mailing address MAY BE A POST O	Nor registered office address in I registered office address: Dora Brande	
(Mailing address MAY BE A POST O	Nor registered office address in I registered office address: Dora Brande 9825 S.W. 80 DRIVE	dress)
(Mailing address MAY BE A POST O	Mor registered office address in I registered office address: Dora Brande 9825 S.W. 80 DRIVE (Florida street address)	
(Mailing address MAY BE A POST O	Mor registered office address in I registered office address: Dora Brande 9825 S.W. 80 DRIVE (Florida street address)	dress)

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	DANIEL J. PHILIBIN	1314 CLAYTHORNE DRIVE JOHNSTOWN, PA 15904	☐ Add ☐ Remove
D	JEFFREY S. PHILIBIN	1314 CLAYTHORNE DRIVE JOHNSTOWN, PA 15904	☐ Add ☐ Remove
<u>D</u>	LUIS F. BRANDE	9825 S.W. 80 DRIVE MIAMI, FL 33173	☐ Add ☐ Remove
	g or adding additional Articles, enter c		(See Page 3 for additional change)
provisions	dment provides for an exchange, recla for implementing the amendment if no applicable, indicate N/A)		

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>	Name	Address	Type of Action
<u>D</u>	DORA L. BRANDE	9825 S.W. 80 DRIVE MIAMI, FL 33173	☑ Add □ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
(attach addit	g or adding additional Articles, enter clional sheets, if necessary). (Be specific	·)	
provisions	dment provides for an exchange, reclation for implementing the amendment if no applicable, indicate N/A)		

The date of each amendmen	nt(s) adoption: August 19, 2011
Effective date <u>if applicable</u> :	August 19, 2011 (date of adoption is required)
,	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) vere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wation was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated	9/1/11 M. Castilla
Signature _ (B	m. Castilla y a director, president or other officer – if directors or officers have not been
sel	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	MICHAEL L. CASTILLA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)