## P10000014504

| (Requestor's Name)                      |                   |           |  |  |
|---|-------------------|-----------|--|--|
|   |                   |           |  |  |
| (Address)                               |                   |           |  |  |
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| (Address)                               |                   |           |  |  |
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| -                                       |                   | (0.1      |  |  |
| (City/State/Zip/Phone #)                |                   |           |  |  |
|   | □ MAZAUT          |           |  |  |
| ☐ PICK-UP                               | ☐ WAIT            | MAIL      |  |  |
|   |                   |           |  |  |
| (Bu                                     | siness Entity Nan | ne)       |  |  |
|   |                   |           |  |  |
| (Do                                     | cument Number)    |           |  |  |
| (50                                     | cament (variber)  |           |  |  |
|   |                   |           |  |  |
| Certified Copies                        | _ Certificates    | of Status |  |  |
|   |                   |           |  |  |
| Special Instructions to                 | Filing Officer    |           |  |  |
| Special Instructions to Filing Officer: |                   |           |  |  |
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TO MAR 25 AN IO: 09
SECRETARY OF STATE
TALLAHASSEE, FLORING

m 2/2/2

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO                          | RPORATION: Duree Unlimited, Inc.           |  |   |  |
|--|--|--|---|--|
| DOCUMENT NUM                           | JMBER: P10000014504                        |  |   |  |
| The enclosed Articles                  | of Amendment and fee                       | are submitted for filing.  |   |  |
| Please return all corre                | spondence concerning th                    | is matter to the following:                                      |   |  |
|  |  | Darrell Forbes   |   |  |
|  | 1  | Name of Contact Person   |   |  |
|  | D  | uree Unlimited, Inc.   |   |  |
|  |  | Firm/ Company  |   |  |
|  | 2700 Somerset Dr. APT# Y105                |  |   |  |
|  |  | Addr <del>e</del> ss   |   |  |
|  | V-1-1                                      | e Lakes, Florida 33311-9467                                      |   |  |
|  | (  | City/ State and Zip Code   |   |  |
| ************************************** | dedecreativ<br>E-mail address: (to be use  | edesigns@yahoo.com ed for future annual report notification)     |   |  |
| For further information                | n concerning this matter,                  | please call:   |   |  |
|  | rell Forbes                                |  | 27-0616   |  |
| Name of C                              | Contact Person                             | Area Code & Daytime Tele   | ephone Number   |  |
| Enclosed is a check fo                 | r the following amount r                   | nade payable to the Florida Depart                               | ment of State:  |  |
|  | \$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |  |
| Mailing Addre<br>Amendment Se          |  | Street Address Amendment Section                                 |   |  |
| Division of Corporations               |  | Division of Corporations   |   |  |
| P.O. Box 6327                          |  | Clifton Building   |   |  |
| Tallahassee, FI                        | _ 32314                                    | 2661 Executive Center Circle<br>Tallahassee, FL 32301            | •   |  |
|  |  | i alialiassee, FL 32301  |   |  |

## Articles of Amendment to Articles of Incorporation

of

| Duree Unlimited, I   | Inc.   |  |  |  |  |
|--|--|--|--|--|--|
| (Name of Corporation as currently filed with   | the Florida Dept. of State)                                |  |  |  |  |
| P10000014504   |  |  |  |  |  |
| (Document Number of Corporation (if known)   |  |  |  |  |  |
| Pursuant to the provisions of section 607.1006, Florida Statuamendment(s) to its Articles of Incorporation:  | ates, this Florida Profit Corporation adopts the following |  |  |  |  |
| A. If amending name, enter the new name of the corporation   | on:  |  |  |  |  |
| N/A  | The new  |  |  |  |  |
| name must be distinguishable and contain the word "cor<br>abbreviation "Corp.," "Inc.," or Co.," or the designation "C<br>name must contain the word "chartered," "professional associ | Corp," "Inc," or "Co". A professional corporation          |  |  |  |  |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  | 2700 Somerset Dr. APT# Y105                                |  |  |  |  |
| (17 methat office basicso <u>MODE DITESTRADE 17 MODELLIS.</u> )  | Lauderdale Lakes, FL                                       |  |  |  |  |
|  | Lauderdale Lakes, FL  33311-9467  AR 25                    |  |  |  |  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  | AMIO: 09 EE, FLORIDA                                       |  |  |  |  |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad  |  |  |  |  |  |
| Name of New Registered Agent: Darrell Forbe  | es   |  |  |  |  |
|  | set Dr. APT# Y105<br>ida street address)                   |  |  |  |  |
| Lauderdale L<br>(City)   |  |  |  |  |  |
| New Registered Agent's Signature, if changing Registered As I hereby accept the appointment as registered agent. I am fam  Signature of New  |  |  |  |  |  |

## 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)

**Title** Name Address **Type of Action** Р Lynette Forbes 2760 Sumerset Drive Suite Y105 Add 33311 US P **Darrell Forbes** 2700 Somerset Dr. APT# Y105 Add 33311-9467 E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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: <u>3/2</u> | 0/2010   |
|--|--------------------------|--|
| •  | 3/20/2010                | (date of adoption is required)   |
| •  | (no more than 90         | days after amendment file date)  |
| Adoption of Amendment(s)                           | (СН                      | ECK ONE)   |
| The amendment(s) was/we by the shareholders was/we |                          | shareholders. The number of votes cast for the amendment(s) pproval.   |
|  |                          | shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):           |
| "The number of votes                               | cast for the amend       | ment(s) was/were sufficient for approval   |
| by   |                          | <b>29</b>  |
| V  | (voting group)           | · · · · · · · · · · · · · · · · · · ·  |
| The amendment(s) was/we action was not required.   | e adopted by the b       | poard of directors without shareholder action and shareholder  |
| The amendment(s) was/we action was not required.   | re adopted by the in     | ncorporators without shareholder action and shareholder  |
| sele   | a director, preside      | nt or other officer – if directors or officers have not been orator – if in the hands of a receiver, trustee, or other court |
| app  | mice neuclary by         | diat fiduciary)  |
|  |                          | Lynette Forbes   |
|  | (Туре                    | ed or printed name of person signing)  |
|  |                          | President  |
|  | (Title of                | person signing)  |