## P10000016983

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## , COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: SOLAK US /NL The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: AKINJA-16JU
Name of Contact Person SOLAK US /NC 8103, Big Pine way RIVIERA BEACH FL 33407

City/State and Zip Code SSakinjayeju ( Jahoo · (om E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Solomon Akinjuteju at (561) 713 - 5107

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ☑ \$52.50 Filing Fee ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section **Amendment Section** Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301



March 18, 2011

SOLOMON AKINJAYEJU SOLAK (US), INC. 8103 BIG PINE WAY RIVIERA BEACH, FL 33407

SUBJECT: SOLAK (US), INC. Ref. Number: P10000016983

We have received your document for SOLAK (US), INC. and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$ is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 011A00006733

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SECRETARY OF STATE

## Articles of Amendment to Articles of Incorporation

of

FILED

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SOLAK (US)	INC.		SECRETARY OF STATE
(Name of Corporation as curr	ently filed with the Floric	la Dept. of State)	SECRETARY OF STATE TALLAHASSEE FLORID
P100000 16983			
(Document Nun	nber of Corporation (if kno	own)	<del></del>
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this F	Iorida Profit Corp	oration adopts the following
A. If amending name, enter the new name o	f the corporation:		
			The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "Corp," "Inc	c," or "Co". A pr	ofessional corporation
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		<del></del>	
(1 incipul byfice dutiess <u>incol BL A STREE</u>			<u> </u>
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)			
D. If amending the registered agent and/or r new registered agent and/or the new regis		n Florida, enter th	e name of the
Name of New Registered Agent:			
New Registered Office Address:	(Florida street d	address)	
		171	orida
	(City)	, (7)	orida de)
		-	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a		and accept the oblig	gations of the position.
	lignature of New Registere	d Agent, if changin;	<del></del>

## 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** SYMON 5135 NW 12TH LANE DAdd SILVA MGR DEER FIELD, FZ | Remove ☐ Add ☐ Remove 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)

The date of each amendment(s) adoption: 03/14/11		
* · · ·	(date of adoption is required)	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(sere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	,,,	
	(voting group)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder	
DatedSignature		
(B) sele	a director, president or other officer – if directors or officers have not been octed, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	SOLOMON AKINJAJEJU	
	(Typed or printed name of person signing)	
	DIRECTOR   PRESIDENT (Title of person signing)	
	( o. Lengen 2.9	