110000016983

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Am 4/13/11

TO: A section Division of Corporations

COVER LETTER

NAME OF CORPORATION: SOL	AK US INC				
DOCUMENT NUMBER: P10000	016983				
The enclosed Articles of Amendment and fee are su	abmitted for filing.				
Please return all correspondence concerning this ma	atter to the following:				
SOLOMON	AKINJATEJU				
Name	of Contact Person				
HECKETARY OF STATE ALL AND SO STATE ALL AND SEE, FLORIDA ALL AND SEE, FLORIDA SEE,	INC				
Fir	m/ Company				
EL 21 8103 Big Pine	way				
正 4 53	Address				
RIVIERA BEACH	tate and Zip Code				
City/ S	tate and Zip Code				
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
SOLOMON: Avinovalue	, 561 713-5107				
Solomoni Akinjutiju Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made					
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is er	nclosed)			
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 Circle				
	Tallahassee, FL 32301				

Articles of Amendment

Articles of Incorporation

FILED

	of	11 APR IZ AM IC): [7
Solak Co	us), inc.	SECHETARY OF S	TATE
(Name of Corporation as cur	rently filed with the Floric)HIDA
710000	016983		
	mber of Corporation (if kno	own)	
Oursuant to the provisions of section 607.100 nmendment(s) to its Articles of Incorporation:		Ilorida Profit Corporation adopts the	followi
A. If amending name, enter the new name of	of the corporation:		
		The n	iew
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "pr	e designation "Corp," "Inc	c," or "Co". A professional corporat	
B. Enter new principal office address, if ap			
Principal office address <u>MUST BE A STRE</u>	ET ADDRESS)		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		•	
(Manning address MAT BE ATOST OFF	ICL BOX)		
			
			
. If amending the registered agent and/or	registered office address i	n Florida, enter the name of the	
new registered agent and/or the new reg		· · · · · · · · · · · · · · · · · · ·	
Name of New Posistand Assure			
Name of New Registered Agent:	-		
New Registered Office Address: (Florida street address)		address)	
		, Florida	
	(City)	(Zip Code)	
ew Registered Agent's Signature, if changi hereby accept the appointment as registered		and account the obligations of the position	111
neresy accept the appointment as registered to	ugem. I um jumutur wiin u	ma accept the obligations of the positio	п,
	Signature of New Registered	d Agent, if changing	

		e title and name of each officer/di	rector being
<u>reit</u>	ne, and address of each Office (s, if necessary)	er and/or Director being added:	
Title Name		Address	Type of Action
MGT LU	IIS XAVIER	4894 CANAL DR LAKE WORTH, FL 3346	IZ Add 3□ Remove
·			☐ Add ☐ Remove
	 		☐ Add ☐ Remove
	lementing the amendment if n	assification, or cancellation of issues to the amendment it	

The date of each amenda	nent(s) adaption: H/M/II
	(date of adoption is required)
Effective date <u>if applicab</u>	le: (no more than 90 days after amendment file date)
Adoption of Amendment	(s) (CHECK ONE)
The amendment(s) was by the shareholders wa	s/were adopted by the shareholders. The number of votes cast for the amendment(s) is/were sufficient for approval.
The amendment(s) was must be separately pro	were approved by the shareholders through voting groups. The following statemen vided for each voting group entitled to vote separately on the amendment(s):
"The number of vo	otes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
/ action was not required	/were adopted by the incorporators without shareholder action and shareholder
Dated	
	e (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
•	(Typed or printed name of person signing)
	President
	(Title of person signing)