Division of Corporations Electronic Filing Cover Sheet

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(((H10000096221 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : DERHY FINANCIAL SERVICES LLC

Account Number : 120090000059

: (786)380-3472

Fax Number : (305)374-8833

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN EAN&DAVIDI INVESTMENTS, INC.

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Corporate Filing Menu

Help



TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORP	ORATION:	EAN&DAVIDI INVESTMEN	TS, INC.
DOCUMENT NU	MBER:	P10000033935	
The enclosed Artic	les of Amendment and fe	e are submitted for filing.	
Please return all co	rrespondence concerning	this matter to the following:	
-		DVIR DERHY	
		Name of Contact Person	
DERHY FINANCIAL SERVICES LLC Firm/ Company 99 NW 183RD ST # 138		,	
		Address	
-		MIAMI, FL 33169	
		City/ State and Zip Code	
	DVIR(@BELLSOUTH.NET used for future annual report notification)	
For further informa	tion concerning this matte	er, please call:	
Γ	OVIR DERHY	at (786) 3	3803472
Name	of Contact Person	Area Code & Daytime Te	lephone Number
Enclosed is a check	for the following amount	t made payable to the Florida Depar	tment of State:
☑ \$35 Filing Fee	\$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 Ad		Street Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations	
P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circ	le

Tallahassee, FL 32301



April 26, 2010

FLORIDA DEPARTMENT OF STATE

Division of Corporations

EANSDAVIDI INVESTMENTS, INC. 9972 NOB HILL LANE SUNRISE, FL 33351

SUBJECT: BANEDAVIDI INVESTMENTS, INC.

REF: P10000033935

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please add a period after inc in the corporate name.

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) 245-6925.

Teresa Brown Regulatory Specialist II FAX Aud. #: H10000096221 Letter Number: 410A00010258

Articles of Amendment to Articles of Incorporation of

2010 APO	ILED
TALLAHASSE	6 AM 9: 16
Ì	CORIDA

EAN&DAVIDI INVESTMENTS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P100 <u>00033935</u>	
(Document Number of Corporat	ion (if known)
Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the follow
A. If amending name, enter the new name of the corporatio	<u>n:</u>
	The new
name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associations of the contains the contains the word "corp."	orp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable:	4601 HOLLY BRANCH DR # 807
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	ORLANDO, FL 32811
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4601 HOLLY BRANCH DR # 807
	ORLANDO, FL 32811
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade	
Name of New Registered Agent: DERHY FINA	ANCIAL SERVICES LLC
99 NW 18 <u>3R</u>	D ST # 138
New Registered Office Address: (Flori	ida street address)
MIAMI (City)	, Florida_33169 (Zip Code)
New Registered Agent's Signature, if changing Registered A	gent:
I hereby accept the appointment as registered agent. I am fam.	iliar with and accept the obligations of the position.
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: (Anach additional sheets, if necessary)

Title	<u>Name</u>	<u>Address</u>	Type of Action
VP	ARIEL YAKHIN	109 MELISSA PRAIL HUBURNBALE, FL 33823	
			□ Add □ Remove
(attach ad	ding or adding additional Articles, dditional sheets, if necessary). (Be	specific)	
<u>provisio</u>	nendment provides for an exchange ons for implementing the amendment ot applicable, indicate N/A)	e. reclassification, or cancellation of i	ssued shares, t itself:
			

The date of each amendment	(s) adoption: 04/23/2010		
, t	(date of adoption is required)		
(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.		
	e approved by the shareholders through voting groups. The following statement d 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)		
-	(voting group)		
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder		
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder		
Dated_04/2	3/2010		
Signature	a director, president or other officer if directors or officers have not been		
(By sele	a director, president or other officer—it directors or officers have not been cted, by an incorporator — if in the hands of a receiver, trustee, or other court		
	pinted fiduciary by that fiduciary)		
	DATE: 550 404		
	DAVIDI EFRAIM		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		