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| (Cit | y/State/Zip/Phone | ∍#) |
| PICK-UP | MAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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Amerid Mewis 6-18-10

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORI | PORATION: | ASSOCIATED EQU | IITY INC. | | |
|----------------------|--|---|--|---------------|--|
| DOCUMENT NUMBER: | | P10000035 | 5992 | | |
| The enclosed Artic | cles of Amendment and fee a | re submitted for filing. | iling. | | |
| Please return all co | orrespondence concerning thi | s matter to the following: | | | |
| | · · · · · · · · · · · · · · · · · · · | HARLES PIERRE | 81 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| | No. of the last of | lame of Contact Person | The Street of the Street | | |
| | | Firm/ Company | | | |
| | • | PO BOX 18561 | i i | | |
| | | Address | 1 i | | |
| | | | i | | |
| | . WEST F | PALM BEACH, FL 33416 | · | | |
| | | ity/ State and Zip Code | • | | |
| | ; | | • | | |
| | E-mail address: (to be use | rr@comcast.net d for future annual report notifie | ation) | | |
| | | | | | |
| For further inform | ation concerning this matter, | please call: | i | | |
| CH | IARLES PIERRE | at (561) | 266-5757 | | |
| Name | of Contact Person . | Area Code & Dayt | ime Telephone Number | a. | |
| Enclosed is a chec | k for the following amount n | nade payable to the Florida | Department of State: | er eggs | |
| · | | _ | • | | |
| | ☐ \$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is encl | | of Status | |
| Mailing A | ddress | Street Address | • • | | |
| Amendmer | nt Section | Amendment Section | | | |
| | Corporations | Division of Corporation | ons | • | |
| P.O. Box 6327 | | Clifton Building | G: 1 | | |
| Tallahasse | e. FL 32314 | 2661 Executive Cente | er Circle | | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

ASSOCIATED EQUITY INC.

12: 26

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| | | Dept. of State) | ZUIU JUN 14 p |
|---|---------------------------------|--|--|
| P100000359 | 92 | • | SECRETARY |
| (Document Number of Corp. | | n) | SECRETARY OF TALLAHASSEE, F |
| arsuant to the provisions of section 607.1006, Florida Smendment(s) to its Articles of Incorporation: | tatutes, this Flo | rida Profit ['] Corpor | |
| . If amending name, enter the new name of the corpor | ation: | | |
| | | • | The new |
| ame must be distinguishable and contain the word "c | corporation," ' | company,"; or "in | corporated" or the |
| obreviation "Corp.," "Inc.," or Co.," or the designation time must contain the word "chartered," "professional ass | "Corp," "Inc, sociation," or ti | ".or "Co". A prof he abbreviation "P. | essional corporation A.'' |
| Enter new principal office address, if applicable: | | ţ | |
| Principal office address <u>MUST BE A STREET ADDRES</u> | <u>S</u>) | | ************************************** |
| | | · · · · · · · · · · · · · · · · · · · | |
| | | Ī | |
| Enter new mailing address, if applicable: | | 4 | |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | | 1 | · · · · · · · · · · · · · · · · · · · |
| | | · · · · · · · · · · · · · · · · · · · | |
| | | , | |
| If amending the registered agent and/or registered of new registered agent and/or the new registered office | | Florida, enter the | name of the |
| | | | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: (I | Florida street aa | (duaga) | |
| New Registerea Office Adaress: (1 | ioriaa sireei aa | | <u> </u> |
| مون دريخ بيد گيو ، ه ^ي نج شه دهه يا دو نجو | City) | , Flor (Zip Code, | |
| | auvi | IZID COUR | , |

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> | | <u>Address</u> | • | Ty | pe of Action |
|--|--|---------------------------------------|--|----------------------------------|--------------------------|-----------------------------|
| <u>D</u> | HENOC MADEL | JS | 114 SW 8T DELRAY B | H AVE EACH, FL 3343 | | Add Remove |
| | | | | | | Add Remove |
| | | | | • | | Add Remove |
| E. If ame | nding or adding addition additional sheets, if neces | nal Articles, ent | er change(s) her | <u>'''</u> | | |
| (under | additional sheets, if heecs, | uaryy. (De spe | | | , , , | |
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| provis | amendment provides for sions for implementing the following to for implementing the following the fo | <u>he amendment</u> | eclassification, of the second | or cancellation in the amendn | of issued nent itself | <u>shares,</u> <u>f:</u> |
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| The date of each amendment | |
|--|--|
| Effective date if applicable: | (dale of adoption is required) |
| Effective date il applicable. | (no more than 90 days after amendment file date) |
| | |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/we by the shareholders was/we | re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval. |
| | re approved by the shareholders through voting groups. The following statement of 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) re adopted by the board of directors without shareholder action and shareholder |
| action was not required. | te adopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/we action was not required. | re adopted by the incorporators without shareholder action and shareholder . |
| Dated | 06/08/2010 |
| sele | a director, president or other officer – if directors or officers have not been ceted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) |
| | CHARLES PIERRE |
| | (Typed or printed name of person signing) |
| | DIRECTOR |
| | (Title of person signing) |