P10000042220

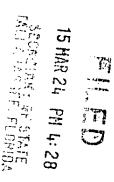
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Amendment Section Division of Corporations	•	TACK TO THE	15 H	·· E 1
NAME OF CORPORATION: SUCCES DOCUMENT NUMBER: P100000422	SFUL IDEAS INC.		MAR 24 PI	
DOCONDAT NOMBER.		<u>ارت</u> من شر		U
The enclosed Articles of Amendment and fee are	e submitted for filing.		PH 4: 28	
Please return all correspondence concerning this	matter to the following:	टीङ		
CAROLYN KAH	HL .			
5004 001174	Name of Contact Person			
ROCA GONZA				
2270 MADV CT	Firm/ Company			
3370 MARY ST				
MIAMI FLORID	Address			
WIAWITEONIB	City/ State and Zip Code			
	·			
CKAHL@RGPA.C	e used for future annual report notification)			
E-man address. (10 be	e used for future annual report nonneation)			
For further information concerning this matter, p	lease call:			
CAROLYN KAHL	_{at} 305 \ 859-6050			
Name of Contact Person	Area Code & Daytime Telephone N	lumber		
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:			
\$35 Filing Fee Secretificate of Status				
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



nt(s) to

(Maine of Corporation as	currently med with the Fig	Tiua Dept. of State	77.74		سينة
P10000042220			15.5 15.5 15.5 15.5 15.5 15.5 15.5 15.5	*. 2	
(Documen	t Number of Corporation (if	cnown)	73	တ	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>F</i>	lorida Profit Corporation ac	iopts the following	; amend	men
A. If amending name, enter the new na	me of the corporation:				
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	o". A professional corpord	orated" or the ab	_The nobreviate contain	ion
B. Enter new principal office address,		3370 MARY ST	REET		
(Principal office address MUST BE A S	MIAMI, FL 33133				
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of		3370 MARY STREET			
		MIAMI, FL 33133			
D. If amending the registered agent an	d/or registered office addre	ss in Florida, enter the nar	ne of the		
new registered agent and/or the new		35 Hi Florida, enter the nan	ne of the		
Name of New Registered Agent RGPA REGISTERED AGENT CORP.					
	3370 MARY STE	₹EET	•		
	(Florida street address)				
New Registered Office Address:	MIAMI , Florid		33133		
	(City)		(Zip Code)		
New Registered Agent's Signature, if c			C.I. III		
I hereby accept the appointment as regis	ered agant. Cam tomillar vi	th and accept the obligation	s of the position.		
Sil	gnature of New Registered Ag	gent, 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:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	DIR	SERGIO E TODISCO	304 Palermo Avenue
Add			Coral Gables, FL 33134
Remove			
2) Change	PVS1	PERLA AYDEE PUENTE RESENDEZ	3370 MARY STREET
Add			MIAMI, FL 33133
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Chemina			
6) Change	•		
Add			
Remove			

Attach a	idditional sheel	ts, if necessary)	. (Be specifi	hange(s) here: c)			
				· · · · · · · · · · · · · · · · · · ·			
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provisi	ons for impler	vides for an exmenting the am indicate N/A)	change, reclas	sification, or cot contained in	ancellation of i the amendmen	ssued shares, it itself:	
							
_							

date this document was signed.	, if other than the
•	
Effective date if applicable: (no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated February 24, 2015	
Signature	_
(By a director, or esident 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)	
PERLA AYDEE PUENTE RESENDEZ	
(Typed or printed name of person signing)	_
PRESIDENT	
(Title of person signing)	