P10000053725

(Re	questor's Name)	
(Ad	dress)	a ⁻
(Ad	dress)	
	(6) (3)	
(Cit	y/State/Zip/Phone	∍#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		

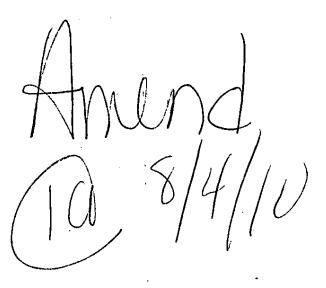




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MUANASSE PLAN



COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

•			
NAME OF CORPOR	ACID	Stain Florida	/WC
DOCUMENT NUMB	DER: <u>P/0000</u>	053725	
The enclosed Articles	of Amendment and fee are s	ubmitted for filing.	
Please return all corres	pondence concerning this m	atter to the following:	
<u>. </u>		D Sharhai of Contact Person	·· + f-us
	Aid S	Stain Florida	
	402 SE E	DIST Levale Address	· <u>-</u>
	Capo Corr	State and Zip Code	990_
	E-mail address: (to be used for	future annual report notification)	Cam
For further information	n concerning this matter, plea	ase call:	
Erral Name of C	Ontact Person	_at (<u>339</u>) <u>699</u> Area Code & Daytime Tel	-5345 ephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depart	tment of State:
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addre Amendment Se Division of Co	ection	Street Address Amendment Section Division of Corporations	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment

to **Articles of Incorporation**

4 \ 1 \ 7 \	of	7	
ACIDSTO	in Florida	_/NC	7
(Name of Corporation as curre	ently filed with the Florid	a Dept. of State)	`% ?
$\underline{\hspace{1cm}}$ $P/0000$	253725		e,
(Document Num	nber of Corporation (if kno	own)	•
dursuant to the provisions of section 607.1006 mendment(s) to its Articles of Incorporation:	5, Florida Statutes, this F	lorida Profit Corporation adopts	the following
. If amending name, enter the new name of	the corporation:		
			he new
ame must be distinguishable and contain the bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "proj	designation "Corp," "In	c," or "Co". A professional corp	
. Enter new principal office address, if app	licable:		
Principal office address <u>MUST BE A STREE</u>			
	 		
. Enter new mailing address, if applicable:	•		
(Mailing address MAY BE A POST OFFI			
. If amending the registered agent and/or r	egistered office address i	n Florida, enter the name of the	
new registered agent and/or the new regis		If I for iday career the manife of the	
Name of New Registered Agent:			
Name of New Registered Agent.		***************************************	
New Registered Office Address:	(Florida street	address)	
		, Florida	
	(City)	(Zip Code)	*
	—		
lew Registered Agent's Signature, if changing the hereby accept the appointment as registered a		and accept the obligations of the po	osition.
-		•	
	Signature of New Registere	d 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; (Attach additional sheets, if necessary)

<u>Title</u> <u>Name</u>	Address	Type of Action
Prosident Danny Shon	hai 402 Se Obst z	 <u> Add</u> <u> 3399</u> 0
Resident Errol D Shar	hai 402 Se 2k	Terraeta Add 33990 Remove
		Add Remove
E. If amending or adding additional Article (attach additional sheets, if necessary).		
F. If an amendment provides for an excha		
provisions for implementing the amend (if not applicable, indicate N/A)	ment if not contained in the am	endment itself:
		

The date of each amendment(s) adoption:	July 20,	10
refeative date is applicable.	(date of ad	loption is required)	
Effective date <u>if applicable</u> : ((no more than 90 days after a	mendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were by the shareholders was/were		. The number of votes	cast for the amendment(s)
The amendment(s) was/were must be separately provided			
"The number of votes ca	ast for the amendment(s) was	/were sufficient for app	proval
by	voting group)	» ;	
(voting group)	÷	
The amendment(s) was/were action was not required.	adopted by the board of dire	ectors without sharehol	der action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators	s without shareholder a	action and shareholder
Dated 🔷	9 July 201	1 <u>0</u>	
select	director, president or other of ted, by an incorporator – if in inted fiduciary by that fiducia	the hands of a receive	
	(Typed or printed	Shanka) I name of person signin	ng)
	President (Title of person signi	<u>+</u>	; ;