P10000074409

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12/14/12--01017--016 **43.75

SECRETARY OF STATE STATE SECRETARY OF COUNTRY TO STATE

Amend

DEC 1 8 2012

T. BROWN

COVER LETTER

Division of Corporations
NAME OF CORPORATION: DUFRAM CORPORATION DOCUMENT NUMBER: P10000074409
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JANE MAIA
Name of Contact Person
DUVEKOT CORPORATION
Firm/ Company
200 S ANDREWS AVENUE - SUITE 101
Address
FORT LAUDERDALE, FL 33301
City/ State and Zip Code
ADMIN@DUVEKOT.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JANE MAIA
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

■\$43.75 Filing Fee &

Certificate of Status

Mailing Address

□ \$35 Filing Fee

TO: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

□\$43.75 Filing Fee &

(Additional copy is

Certified Copy

enclosed)

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

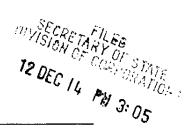
□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

Articles of Amendment to Articles of Incorporation of



DUFRAM CORPORATION

DUFRAIVI CORPORATION	
(Name of Corporation as currently filed with the	Florida Dept. of State)
P10000074409	
(Document Number of Corporation ((if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corporation:	
	The new
ame must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ord "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
. Enter new principal office address, if applicable:	671 NW 4TH AVENUE
Principal office address MUST BE A STREET ADDRESS)	SUITE B57
	FORT LAUDERDALE, FL 33311
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	
	<u>s.</u>
Name of New Registered Agent	
(Florida st	treet address)
New Registered Office Address:	, Florida
New Registered Office Address:(City	(Zip Code)
ew Registered Agent's Signature, if changing Registered Agenthereby accept the appointment as registered agent. I am familiar	

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:

(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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	ALEXANDRE SIQUEIRA	617 NW 4TH AVENUE - SUITE B57
Add X Remove			FORT LAUDERDALE, FL 33311
2) Change	s	ROBERTO TESCH	617 NW 4TH AVENUE - SUITE B57
Add			FORT LAUDERDALE, FL 33311
Remove 3) Change	Р	NICHOLAS MYRIANTHEFS	617 NW 4TH AVENUE - SUITE B57
Add XRemove			FORT LAUDERDALE, FL 33311
4) Change	PDST	NICHOLAS MYRIANTHEFS	671 NW 4TH AVENUE - SUITE B57
X Add Remove			FORT LAUDERDALE, FL 33311
5) Change			
Remove			
6) Change			
Remove			

amending or adding additional Ar tach additional sheets, if necessary)	. (Be specific)			
		<u> </u>		
		· ·		
- 155A/Y				
				
				
				<u></u>
an amendment provides for an exc	change, reclassifi	cation, or cancel	ation of issued sha	ıres.
rovisions for implementing the am	nendment if not c	ontained in the a	mendment itself:	
(if not applicable, indicate N/A)				
				<u> </u>
				

The date of each amendment(s) ac	loption: 08/31/2012
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.
	proved by the shareholders through voting groups. The following statement 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)
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
Dated 08/31/2	2012
Signature (By a diselected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court and fiduciary by that fiduciary)
	NICHOLAS MYRIANTHEFS
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)