P10000078730

(Re	questor's Name)	
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Amena Brown 1-6/2

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>Omega</u>	may mu	lhi services
DOCUMENT NUMBER: P/0000 7	8730	
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
Emile Ma	uc	
1	Name of Contact Person	
	Firm/ Company	
bab 9 4h A	Ve West	
	Address	
Bradenton	City/ State and Zip Code	25
M. I am Va	City/ State and Zip Code	his as m
E-mail address: (to be	used for auture annual report	notification)
For further information concerning this matter, ple	ease call:	
Emile Masc	at (<u>305</u> -	755-2641
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount mad	e payable to the Florida Dep	artment of State:
\$35 Filing Fee Sertificate 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 Address		Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of OMEGO Moul Multi-Services, The (Name of Corporation as currently filed with the Florida Dept. of State) P100000 78730 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	DDRESS)	Pot, Fl 342	<u>e</u> 9/
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)		
D. If amending the registered agent and/or regis		a, enter the name of the	
Name of New Registered Agent:			
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip Code	e)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing



If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)

Name

Address

1) VP

YOLOOCH

Codet

Name

Address

7808 Tanghilla ave

Nih Yn Port, Fl 34291

2) Em' le Marc

Gue 9th Awa w

Bradendon, Fl 34205

3)

4)

15

16

If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

Title(s)

Name

Title(s)

Name

OUIS H Chavannes

4)

2)

5)

3)____

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)					
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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
The date of each amendment(s) adoption: 12-24-2011
The date of each amendment(s) adoption.
Effective date if applicable:
(no more than 90 days after amendment file dute)
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 December 24, 201/ Signature End
Signature Equal 2
(By a director, president 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)
Fmile, Marc
(Typed or printed name of person signing)
President.
(Title of narrow signing)