P10000096926

| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| , |
| (City/State/Zip/Phone #) |
| (City/State/Zip/Prione #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| · — |
| |
| Special Instructions to Filing Officer: |
| |
| |
| } |
| |
| |
| |
| |

Office Use Only



400205227084

04/28/11--01046--019 **52.50



15 M

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORAT | rion: <u>DECO FU</u> | por Iblas corp | |
|--|--|--|---|
| DOCUMENT NUMBEI | 1: P10000094 | 0926 | |
| The enclosed Articles of A | Amendment and fee are | submitted for filing. | |
| Please return all correspon | ndence concerning this | matter to the following: | |
| | MERIZA DUT | 4 N/ ne of Contact Person | |
| | Eco Floor: | Firm/ Company | · |
| | 5119 SW 138 | PL Address | |
| | Miani ; | F1, 33186 State and Zip Code | |
| | E-mail address: (to be used t | for future annual report notification) | |
| For further information co | oncerning this matter, pl | lease call: | |
| Meriza Du | | at (786) 536 - 8° | |
| Name of Cont | | Area Code & Daytime Tel | • |
| Enclosed is a check for th | e following amount mad | de payable to the Florida Depart | tment of State: |
| | 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 Address Amendment Section Division of Corpo P.O. Box 6327 Tallahassee, FL 32 | rations | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl | e |

Tallahassee, FL 32301

Articles of Amendment ~ to

Articles of Incorporation

| ~ | ~ 01 | | |
|---------------------------|---------------------|--------------------|-----------|
| Deco | 700V | Ideas | Corp. |
| (Name of Corporation as c | urrently filed witl | h the Florida Dept | of State) |
| | | | |
| | | | |
| (Document) | Number of Corner | ation (if known) | |

| (Name of Corporation as currently | filed with the Flor | ida Dept. of State) | |
|---|--------------------------|-----------------------------|---------------------------------|
| (Document Number | of Corporation (if kr | nown) | |
| Pursuant to the provisions of section 607.1006, Fl amendment(s) to its Articles of Incorporation: | orida Statutes, this | Florida Profit Corporation | adopts the follo |
| A. If amending name, enter the new name of the | corporation: | | |
| | | | The new |
| name must be distinguishable and contain the vabbreviation "Corp.," "Inc.," or Co.," or the desiname must contain the word "chartered," "professions" | gnation "Corp," "I | 'nc," or "Co". A profession | orated" or the onal corporation |
| B. Enter new principal office address, if applicab | ole: | | ***- |
| (Principal office address MUST BE A STREET A) | | | AE SE |
| | | | Ap |
| | | | AS 2 5 |
| | | | 28 AH |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B | 20X) | | 明明に |
| (Manning man ess Mari DD711 OS1 O11 ACD D | <u></u> | | <u> </u> |
| | | | 55 55 |
| | | | |
| D. If amending the registered agent and/or regist | | in Florida, enter the nam | e of the |
| new registered agent and/or the new registere | <u>d office address:</u> | | |
| Name of New Registered Agent: | | | |
| | - 1 (- 11) | | |
| New Registered Office Address: | (Florida street | t address) | |
| | (2 70 700 50 50 70 | addi cooj | |
| | (C:4.) | Florida_ | |
| | (City) | (Zip Code) | |
| New Registered Agent's Signature, if changing Re | | | |
| I hereby accept the appointment as registered agent. | I am familiar with | and accept the obligations | of the position. |
| | | | |
| Signat | ura of New Register | and Agent if changing | |

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)

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|---|---------------------------------|-----------------------|
| SC | MERIZA DUran | 7819 NW 10871 Doval F1.33178 | _ 🗖 Add _ 🗖 Remove |
| | | | _ |
| | | | _ □ Add _ □ Remove |
| (attach a | additional sheets, if necessary). (Be spe | cific) | |
| | | | |
| | | | , |
| provisi | mendment provides for an exchange, reions for implementing the amendment in applicable, indicate N/A) | | |
| | | | ,,, |
| | | | ***** |
| | | | |
| | | | |

| The date of each amendment(s) adop | otion: | 4 | 111 |
|---|--|----------|--|
| r | | doption | n is required) |
| Effective date <u>if applicable</u> : (no mo | re than 90 days after | amendr | lment file date) |
| | | | • |
| Adoption of Amendment(s) | (CHECK ONE) | | |
| The amendment(s) was/were adopted by the shareholders was/were suffice. | | s. The | number of votes cast for the amendment(s |
| | | | ough voting groups. The following statement of the separately on the amendment(s): |
| "The number of votes cast for t | the amendment(s) was | s/were s | sufficient for approval |
| by | group) | | .,, |
| (voting | group) | | |
| The amendment(s) was/were adopted action was not required. | ed by the board of dire | ectors v | without shareholder action and shareholde |
| The amendment(s) was/were adopted action was not required. | ed by the incorporator | s withc | out shareholder action and shareholder |
| Dated 04/04/1 | U | | |
| (By a direct | or, president or other | | - if directors or officers have not been |
| | an incorporator – if if duciary by that fiduci | | ands of a receiver, trustee, or other court |
| l | Voris gar. | cia | 7 |
| | (Typed or printe | d name | 7 e of person signing) |
| | This gave | iu | <u> </u> |
| | (Title of person sign | ing) | |