P.11000011662

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

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: | PLATINUM REFINISHING, INC. | | |
|------------------------------------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|--|
| DOCUMENT NUMB | MBER:P11000011662 | | | |
| The enclosed Articles of | f Amendment and fee | are submitted for filing. | | |
| Please return all corresp | oondence concerning th | is matter to the following: | | |
| | | ASSIO A SILVEIRA | | |
| | 1 | Name of Contact Person | | |
| | | Firm/ Company | | |
| | 21951 SO | UNDVIEW TERRACE G102 Address | <u> </u> | |
| | BOO | CA RATON FL 33433 | | |
| | | City/ State and Zip Code | | |
| | E-mail address: (to be use | asl@hotmail.com ed for future annual report notification) | | |
| For further information | concerning this matter, | please call: | | |
| | O A SILVEIRA ontact Person | at (954) 8 Area Code & Daytime Te | | |
| Enclosed is a check for | the following amount r | nade payable to the Florida Depar | 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 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 Circ | la | |
| | | Tallahassee, FL 32301 | | |

Articles of Amendment to

| | Articles of Incorporation of | 11 SED. |
|---------|-------------------------------------------------------------------------------------|-----------------------------|
| | PLATINUM REFINISHING, INC. | 11 SEP 12 AM 8: 38 |
| (Name o | PLATINUM REFINISHING, INC. of Corporation as currently filed with the Florida Dept. | of State ALLAHASSE OF STATE |
| | P11000011662 | ASSEE, FLORIDA |
| | (Document Number of Corporation (if known) | |

| P11000011662 | AND THE ORIDA |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| (Document Number of Corpora | tion (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statu amendment(s) to its Articles of Incorporation: | ites, this Florida Profit Corporation adopts the follow |
| A. If amending name, enter the new name of the corporation | on: |
| name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Condain the word "chartered," "professional associ | Corp," "Inc," or "Co". A professional corporation |
| B. Enter new principal office address, if applicable: | 21951 SOUNDVIEW TER |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | SUITE G102 |
| | BOCA RATON, FL 33433 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | Same as aboue |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad | |
| Name of New Registered Agent: TAX SECRE | ETS, INC |
| New Registered Office Address: 5052 NW 45 | TH AVE ida street address) |
| COCONUT (City) | |
| New Registered Agent's Signature, if changing Registered As I hereby accept the appointment as registered agent. I am fam Signature of New | |

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)

Title Name <u>Address</u> **Type of Action** CASSIO A SILVEIRA 21951 SOUNDVIEW TER G102 2 Add JORGE DA CUNHA ___ 🗖 Add 8106 MIZNER LANE ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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: 09/09/2011 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Effective date if applicable: O() O() (date of adoption is required) |
| • (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) (<u>CHECK ONE</u>) |
| 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 |
| Signature SOESE DA CLANHA. (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) |
| (Typed or printed name of person signing) |
| (Title of person signing) |