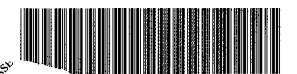
## P11000012185

(Requestor's Name)
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PICK-UP WAIT MAIL
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2011 MAY 23 PM 1: 50
SECRETARY OF STATE

Amend Brown 5-27-

## **COVER LETTER**

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION: CRAY-ROSE INC			
DOCUMENT NUMBER: 9 11000018185			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
HAREEN GERSHMAN Name of Contact Person			
GRAY-ROSE NC			
PO BOX 890358			
Address			
DAVIE FL 33389-035  City/State and Zip Code	8		
City/ State and Zip Code			
Peenie O Gray-rose Com E-mail address: (to Reused for future annual report notification)			
is man address. (to equised for facility annual report notification)			
For further information concerning this matter, please call:			
HAREEN GERSHMAN at (954) 849	-4004		
Name of Contact Person Area Code & Daytime T	elephone Number		
Enclosed is a check for the following amount made payable to the Florida Depa	artment of State:		
\$35 Filing Fee \$\ \$\ \$\\$	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Street Address			
Amendment Section Amendment Section Division of Corporations Division of Corporations			
Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Circ	cle		

Tallahassee, FL 32301

## **Articles of Amendment**

to Articles of Incorporation	2011. FIL ~
CRAY ROSE, INC.	ASECRETAL 23 PM
(Name of Corporation as currently filed with the Florida Dept. of State)	ASSA CONTRACTOR
P 11000018185	- CEASTAIN
 (Document Number of Corporation (if known)	- RIOA

Pursuant to the provisions of section 607.1006, Famendment(s) to its Articles of Incorporation:	lorida Statutes, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the	e corporation:
name must be distinguishable and contain the	word "corporation," "company," or "incorporated" or the
abbreviation "Corp.," "Inc.," or Co.," or the des name must contain the word "chartered," "professi	ignation "Corp," "Inc," or "Co". A professional corporation ional association," or the abbreviation "P.A."
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	
C. Enter new mailing address, if applicable: (Malling address MAY BE A POST OFFICE I	BOX) PO BOX 290358
	DAVIE, FL 33309.0358
D. If amending the registered agent and/or registered agent and/or the new registered	stered office address in Florida, enter the name of the
Name of New Registered Agent:	AREEN S GERSHMAN
New Registered Office Address:	GOI SW 84 AVENUE (Florida street address)
$\overline{\mathcal{P}}$	AVIE Florida 33388 (City) (Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	Registered Agent:  I am familiar with and accept the obligations of the position.
	ally result of the same

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>	Name C	<u>Address</u>	Type of Action
PRES	SUBAN GRAY	3188 NW 183 AVE SUNRISE FL 33308	D Add CHANGE FROM DRES PRES
MGR	MURRAY ROSE	8915 BISCAVNE BLY	Add Remove
SECTREA	HAREEN SGERSHMA	MIAMI, FL 3313M N 8901 SW 84 A1 SAVIE, FL 33388	Add Remove
	ng or adding additional Articles, enter of itional sheets, if necessary). (Be specificational sheets)		
F. <u>If an ame</u>	ndment provides for an exchange, reck s for implementing the amendment if n	assification, or cancellation of issue	ied shares, self:
(if not	applicable, indicate N/A)		
			<del>, , , _ , , , , , , , , , , , , , , , ,</del>

	otion: 5-19-8011
	(date of adoption is required)
Effective date if applicable:	re than 90 days after amendment file date)
(No mo	to state to days after amonament for all of
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.
	ved by the shareholders through voting groups. The following statemen ch 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	95
(voting	group)
The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder
Dated 5 - 10	7-8011
Signature 10	read Herehman
selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)
Ho	AREEN S GERSHMAN
	(Typed or printed name of person signing)
<del></del>	(Title of person signing)