000014915

(Re	equestor's Name)	
(Ad	dress)	·····
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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Amend Armin 11-19-11

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	SUNCARIBBEAN DISTRIBUTORS INC.		
DOCUMENT N	NT NUMBER: P11000014915			
The enclosed Art	icles of Amendment and	fee are submitted for filing.		
Please return all o	correspondence concerni	ng this matter to the following:		
		PATRICK WALTERS SR.		
		Name of Contact Person		
	SUNCA	RIBBEAN DISTRIBUTORS INC.		
Firm/ Company				
	5931 SW 21 STREET			
		Address .		
		WEST PARK FL 33023		
		City/ State and Zip Code		
		rspatrick90@gmail.com e used for future annual report notification)		
For further inform	nation concerning this ma	atter, please call:		
	Patrick Walters	at (954) 854 7003		
Nam	e of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a chec	ck for the following amou	ant made payable to the Florida Department of State:		
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section		Street Address Amendment Section		
	f Corporations	Division of Corporations		
P.O. Box 6327		Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301		

Articles of Amendment Articles of Incorporation

SUNCARIBBEAN DISTRIBUTORS INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

	Articles of Amendmen	ıt	P^{\bullet} .
	to		
A	Articles of Incorporation of	n	1110cz - CE
CUMCADIDDEAN		INC	ZOIJOCT IT AMII: 4 TALLAHASSEE, FLORIDE
(Name of Corporation as curre	N DISTRIBUTORS	INU.	- LAHARAYON 11:4
		a Depti of State)	SEE. FISHE
****	000014915 ber of Corporation (if kno		— CAID,
·	•	, ,	
rsuant to the provisions of section 607.1006 tendment(s) to its Articles of Incorporation:	5, Florida Statutes, this F	lorida Profit Corpe	oration adopts the following
If amending name, enter the new name of	the corporation:		
me must be distinguishable and contain t			The new
breviation "Corp.," "Inc.," or Co.," or the me must contain the word "chartered," "proj	designation "Corp," "Inc	c," or "Co". A pro	ofessional corporation
Enter new principal office address, if appl rincipal office address <u>MUST BE A STREE</u>			
Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFIC</u>			
(Mailing address <u>MAY BE A POST OFFIC</u>			
		n Florida, enter th	e name of the
(Mailing address MAY BE A POST OFFICE If amending the registered agent and/or renew registered agent and/or the new regis	egistered office address i	n Florida, enter th	e name of the
If amending the registered agent and/or renew registered agent and/or the new regis	egistered office address i	n Florida, enter the	e name of the
If amending the registered agent and/or re	egistered office address i	n Florida, enter th	e name of the
If amending the registered agent and/or renew registered agent and/or the new regis	egistered office address i		e name of the
If amending the registered agent and/or renew registered agent and/or the new registered agent and/or the new registered Agent:	egistered office address i stered office address:	address)	
If amending the registered agent and/or renew registered agent and/or the new registered agent and/or the new registered Agent:	egistered office address i stered office address:	address)	orida
If amending the registered agent and/or renew registered agent and/or the new registered agent and/or the new registered Agent:	egistered office address istered office address: (Florida street of (City)	address), Flo	orida

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
<u>VP</u>	COLIN WHITE	319 BEACH 27 STREET FAR ROCKAWAY NY 11691	_
			_
	<u> </u>		_
(attach a	dditional sheets, if necessary). (Be specific)	
provisi		nge, reclassification, or cancellation of is ment if not contained in the amendment	
-			

The date of each amendmen	t(s) adoption: October 11, 2011
Effective date if applicable:	October 11,2011 October 11,2011 (no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	are approved by the shareholders through voting groups. The following statement and 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)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated 10/1	Heles Lite
	a director, president or other officer - if directors or officers have not been
	ected, by an incorporator – if in the hands of a receiver, trustee, or other court
app	ointed fiduciary by that fiduciary)
	Patrick A. Walters
	(Typed or printed name of person signing)
	President
	(Title of person signing)