P11000016917

∢ (Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	
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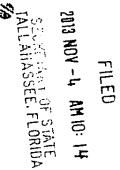
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR.		Group Inc	
DOCUMENT NUMB	P11	000016917	
The enclosed Articles of	f Amendment and fee are so	ubmitted for filing.	
Please return all corresp	oondence concerning this ma	atter to the following:	
		Mahesh Patel	
-		Name of Contact Person	1
-		Firm/ Company 5890 Sw 43rd st rd	
-		Address Ocala, FL.34474	
-		City/ State and Zip Cod	e
	N	Mikecitgo@gmail.com	ı
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
Mahesh Patel		352 at (361 3878
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address Indiment Section It ion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of Wp Group Inc

FILED

	·	11220
(Name of Corporation as curr	rently filed with the Florida Dept. of State)	2013 NOV - 4 AM (O: 1
	P11000016917	,
. (Document Nu	mber of Corporation (if known)	SECHEDALY OF STATE
Pursuant to the provisions of section 607.1006 ts Articles of Incorporation:	, Florida Statutes, this Florida Profit Corporation	adopts the following amendment(s)
. If amending name, enter the new name o	of the corporation:	
		The new
	the word "corporation," "company," or "incom "Corp," "Inc," or "Co". A professional corp or the abbreviation "P.A."	
B. Enter new principal office address, if apprincipal office address MUST DE A STREET		
Principal office address <u>MUST BE A STREI</u>	<u></u>	
		
C. Enter new mailing address, if applicable		
(Mailing address <u>MAY BE A POST OFF</u>		
N 16 N (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	14 1 00° 11 ' F1 '11 44	
new registered agent and/or the new reg	registered office address in Florida, enter the neither office address:	ame of the
	Mahesh Patel	
Name of New Registered Agent	5890 Sw 43rd st rd	
	(Florida street address)	_
New Registered Office Address:	Ocala , Flori	34474
rew registered Office radio ess.	(City)	(Zip Code)
New Registered Agent's Signature, if chang	ing Registered Agent: agent. I am familiar with and accept the obligate	ious of the position
neres, accept the appointment as registered	agem. Tam jummar win und accept me obligan	ons of me position.
	CAL Design of Association	
Signati	re 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PS	Mahesh Patel	5890 Sw 43rd st rd
Add			Ocala, FL 34474
Remove			
2) Change	PS	Valimohammed G. Panara	3740 SE 136th PL
Add		· · · · · · · · · · · · · · · · · · ·	Summerfield, FL.34491
Remove		, , , , , , , , , , , , , , , , , , ,	
3) Change			
Add			
Remove			-
4) Change			
Add			
Remove			
5) Change			
Add		,	
Remove			
6) Change			
Add			
Remove			

(A	f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)
_	
<u>I</u>	f 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) ac	11/01/2013 loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated OI	o2/13 whesh later	
Signature M	whesh later	
(By a d selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court led fiduciary by that fiduciary)	
	Mahesh Patel	
	(Typed or printed name of person signing)	
	PS	
	(Title of person signing)	