P1100030720

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COVER LETTER

TO: Amendment Section

Division of Cor	porations		
NAME OF CORPO	DRATION: Sand	ala Inc.	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUM	1BER: <u>P110000</u> 3	30720	
The enclosed Article	es of Amendment and fee a	re submitted for filing.	
Please return all corn	respondence concerning thi	s matter to the following:	
_	Syld G	ilani / Jackik ame of Contact Person	Subia
	Sandala	Firm/ Company	····
		OST. Suite 102 Address	,
		Fla. 33184. ity/State and Zip Code 2 For Clothes. Come 1 for future annual report notification)	·
	on concerning this matter,	please call:	
Jackel		at (<u>305</u>) <u>553</u> 8 Area Code & Daytime Tel	3631 X 213.
_	Contact Person	ade payable to the Florida Depar	
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Add Amendment : Division of C P.O. Box 632 Tallahassee, 1	Section Corporations 17	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301	e

Articles of Amendment to **Articles of Incorporation**

TAJECAS AND PAIR SE

P11000030720

(Document Number of	Corporation (if kr	nown)
Pursuant to the provisions of section 607.1006, Floramendment(s) to its Articles of Incorporation:	ida Statutes, this	Florida Profit Corporation adopts the follow
A. If amending name, enter the new name of the co	rporation:	
		The new
name must be distinguishable and contain the wo abbreviation "Corp.," "Inc.," or Co.," or the design name must contain the word "chartered," "profession	ation "Corp," "It	nc," or "Co". A professional corporation
B. Enter new principal office address, if applicable	<u> </u>	
(Principal office address <u>MUST BE A STREET ADD</u>		
		
	-	· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>X</u>)	
D. If amending the registered agent and/or register new registered agent and/or the new registered of the new		in Florida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street	address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg	istered Agent:	
I hereby accept the appointment as registered agent.		and accept the obligations of the position.
Signatur	e of New Register	ed 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)

Type of Action change spelling of name M Add ☐ Remove ☐ Add ☐ Remove ☐ 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) PID

The date of each amendment((s) adoption:
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	east for the amendment(s) was/were sufficient for approval
by	(voting group)
((voting group)
action was not required.	e adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
Dated	u/\$/11
selec	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)
	Syld Gilanu (Typed or printed name of person signing)
	President (Title of person signing)