

P11000062369

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Anen C.COULLIETTE

DEC 28 2011

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: M&K Dream	m Inc	
DOCUMENT NUMB	ER: P1100006236	69	
The enclosed Articles	of Amendment and fee are su	ubmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	Pamela Clark		
·		Name of Contact Person	n
	Capital Managen	nent Consultants	s, LLC
		Firm/ Company	
	743 Gantt Ave		
	···	Address	
_	Sarasota, Florida	34232	
	_	City/ State and Zip Cod	e
pan	nela@corpmark.u	ıs	
<u> </u>		sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Pamela Clark		at (941	, 3201837
Name o	f Contact Person		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 enclosed)	□\$43.75 Filing Fee & Certified Copy (Additional copy is (Additional C	□\$52.50 Filing Fee Certificate of Status Certified Copy Topy is enclosed)
Ame Divis P.O.	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle essee, FL 32301

Articles of Amendment to Articles of Incorporation of

of	f ·	
M&K Dream Inc		
(Name of Corporation as currently filed with the I	Florida Dept. of State)	
P11000062369		
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendmen	ıt(s) to
A. If amending name, enter the new name of the corporation:		
	The new	
name must be distinguishable and contain the word "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Sarasota, Florida 34232	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	743 Gantt Ave	
	Sarasota, Florida 34232	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		
Name of New Registered Agent Capital Managem	ent Consultants LLC	유글
743 Gantt Ave		3.3
(Florida str	reet address)	Ľ, –
New Registered Office Address: Sarasota,	, Florida 34232	
(City)	(Zip Code)	ฮ์=ี

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and affept the obligations of the position.

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)

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.

Example: 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove			
2) Change Add Remove		_	
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Art attach additional sheets, if necessary).). (Be specific)
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If an amendment provides for an exc provisions for implementing the amo (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
	•

he date of each amendment(s) a	deption: 12-22-20//
Affective date if applicable:	12.22.2011
	12 · 22 · 261/ (no more than 90 days after amendment file date)
doption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach 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)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated 12	1-22-11 ABA
(By a d	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	Marco Fin: (Typed or printed name of person signing)
	Sirector Vice President (Title of person signing)
	(Title of person signing)