P11000078916

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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Paradise Reef SFL Inc DOCUMENT NUMBER: P11000078916 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Mariana Lamprecht Name of Contact Person Paradise Reef SFL Inc. Firm/ Company PO Box 10 Address Cortez, Florida 34215 City/ State and Zip Code mariana@monolextrading.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Mariana Lamprecht Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee **□\$43.75** Filing Fee & **□\$43.75** Filing Fee & ■\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section **Amendment Section** Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Paradise Reef SFL Inc			
(Name of Corporation as currently file	ed with the Florida Dep	t. of State)	
P11000078916			
(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Pro	fit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the cor	rporation:		
			The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp,' word "chartered," "professional association," or the a	" "Inc," or "Co". A pre		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDI			
			<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0		12 FEB
D. If amounding the presistance of any total control of the presistance of the presistanc			FILED -8 AMII:
 If amending the registered agent and/or registere new registered agent and/or the new registered or 			1 9
Name of New Registered Agent		· ·	:
	(Florida street address)		
New Registered Office Address:		. Florida	
	(City)	(Zip Cod	le)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent.	am familiar with and acc		ition.
Signature of New	v Reginered Agent, if chai	nging	

Page 1 of 4

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	0	Dmitry Sirotin	H16 - App 15
Yes Add Remove			Lipetsk, Lipetsk-2 Russian Federation
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)		
Not Applicable			
		·	
			
F. If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or canding the second secon	ancellation of issued sh the amendment itself:	ares,
Not Applicable	,		
			_
			

The date of each amendment(s)	adoption: February 6, 2012
Effective date if applicable:	ebruary 6, 2012
I applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	
•	(voting group)
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder
_{Dated} Febru	ary 06, 2012
Signature C	Legalito.
(By a	director, president or other officer - if directors or officers have not been
	ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Mariana Lamprecht
	(Typed or printed name of person signing)
	President
	(Title of person signing)