P11000082064

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2012 MAY 15 AM 10: 48
SECRETARY OF STATE
FALLAHASSEE, FLORIDA

Amend

MAY 1 8 2012 T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	10N:	HINE 5348 COF P1100008206		
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.		
Please return all correspor	idence concerning this ma	tter to the following:		
	MONIC	QUE TRONCON	IE CPA	
		Name of Contact Person	1	
	MONIQUE TRONCONE CPA PA		E CPA PA	
		Firm/ Company		
	55 NE 5	TH AVENUE SL	JITE 501	
		Address		
	ВОС	A RATON, FL 3	3432	
		City/ State and Zip Code	3	
	moni	ca@troncone-cp	a.com	
	E-mail address: (to be us	ed for future annual report	notification)	
For further information concerning this matter, please call:				
	TRONCONE	_{at (} 561	_ _. 417-0308	
Name of Co	ontact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the	following amount made p	payable to the Florida Depa	rtment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amendm Division P.O. Box	Address nent Section of Corporations 6 6327 see, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301	

Articles of Amendment Articles of Incorporation

SUNSHINE 5348 CORPORATION

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

P11000082064

(Document Number of Corporation (if known)

TALECARIAN IS AMIDINE Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

N/A		
	"Corp," "Inc," or	ion," "company," or "incorporated" or the c "Co". A professional corporation name must "P.A."
Enter new principal office address, if applicable:		6401 CONGRESS AVENUE
rincipal office address MUST BE A STREET ADDRESS)		SUITE 230
		BOCA RATON, FL 33487
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI		N/A
		N/A
		N/A
(Mailing address MAY BE A POST OFFI	CE BOX) registered office ad	dress in Florida, enter the na me of the
(Mailing address <u>MAY BE A POST OFFI</u>	CE BOX) registered office ad istered office addre	dress in Florida, enter the na me of the
Mailing address MAY BE A POST OFFI If amending the registered agent and/or new registered agent and/or the new registered N.I.	CE BOX) registered office ad istered office addre	dress in Florida, enter the na me of the
If amending the registered agent and/or new registered agent and/or the new registered Agent N/A	CE BOX) registered office ad istered office addre	dress in Florida, enter the na me of the
If amending the registered agent and/or new registered agent and/or the new registered Agent N/A	registered office addresses A	street address)

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:

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

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 Add Remove	N/A	N/A	N/A
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove	<u> </u>		
6) Change Add Remove			

. If amending or adding additional Article (attach additional sheets, if necessary).	(Be specific)
V/A	
F. If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adoption: U5/U9/2012		
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 adopted by the shareholders was/were sufficien	y the shareholders. The number of votes cast for the amendment(s) t for approval.	
	by the shareholders through voting groups. The following statement 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/were adopted b action was not required.	by the board of directors without shareholder action and shareholder	
action was not required.	by the interporators without shareholder action and shareholder	
Dated 05/09/2012		
selected, by a	r, president or other officer – if directors or officers have not been n incorporator – if in the hands of a receiver, trustee, or other court uciary by that fiduciary)	
NO	RMAN HERNANDEZ	
	(Typed or printed name of person signing)	
PR	ESIDENT	
	(Title of person signing)	