(Requestor's Name) (Address) (Address) (Address) (December 2010) (Address) (December 2010) (Address) (December 2010) (December

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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Offerama, Inc.

DOCUMENT NUMBER: p11000091087

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marti	n Frank		
		ame of Contact Person	
<u> </u>		Firm/ Company	· · · · · · · · · · · · · · · · · · ·
4280	10th Avenue SE		
		Address	
Naple	s, FL 34117		
	C	ity/ State and Zip Code	
mrmai	tinfrank@gmail.com E-mail address; (to be u	sed for future annual report	t notification)
For further information	a concerning this matter, plea	ise call:	
Martin Frank	······································	at (<u>239</u>	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
☑ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Status Certificate of Status Certified Copy (Additional Copy is enclosed)
	ing Address ndment Section		Address
	sion of Corporations		Iment Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

	Articles of Amendment	
	to Articles of Incorporation	20, 11
· · · ·	of	NOU S
OFFER	AMA. INC.	Constate)
(Name of Corporation as curren		of State) AHAAAA
PILO	00091087	SF. ST.
	ber of Corporation (if known)	OAL
ursuant to the provisions of section 607.1006 mendment(s) to its Articles of Incorporation:	6, Florida Statutes, this Florida	Profit Corporation adopts the following th
. If amending name, enter the new name of	the corporation:	
he new name must be distinguishable and cont	tain the word "corporation," "co	ompany," or "incorporated" or the
bbreviation "Corp.," "Inc.," or Co.," or the	designation "Corp," "Inc," or "	"Co". A professional corporation
ame must contain the word "chartered," "profe	essional association," or the abl	breviation "P.A."
. Enter new principal office address, if appli		
8. <u>Enter new principal office address, if appli</u> Principal office address <u>MUST BE A STREET</u>		· · · · ·
Principal office address <u>MUST BE A STREET</u> . <u>Enter new mailing address, if applicable:</u>	<u>TADDRESS</u>)	
Principal office address <u>MUST BE A STREET</u>	<u>TADDRESS</u>)	
Principal office address <u>MUST BE A STREET</u> . <u>Enter new mailing address, if applicable:</u>	<u>TADDRESS</u>)	
Principal office address <u>MUST BE A STREET</u> . <u>Enter new mailing address, if applicable:</u>	<u>TADDRESS</u>)	
Principal office address <u>MUST BE A STREET</u> . <u>Enter new mailing address, if applicable:</u>	<u>TADDRESS</u>)	
Principal office address <u>MUST BE A STREET</u> • <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFIC</u> • <u>If amending the registered agent and/or re</u>	TADDRESS)	da, enter the name of the
Principal office address <u>MUST BE A STREET</u> . <u>Enter new mailing address, if applicable:</u>	TADDRESS)	da, enter the name of the
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I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be Please indicate the title(s), name and address for each officer/director

the record to be. Please indicate the title(s), name and address for each officer/director. (Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	Name	Address
1 <u>)CEO</u>	Martin Frank	4280 10th Avenue SE Naples, FL 34117
2) <u>COO</u>	Ariel Cruz	4280 10th Avenue SE Naples, FL 34117
3)	· · · · · · · · · · · · · · · · · · ·	
4)	·	
5)	·	
6)		

If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

Title(s)	Name	Title(s)	Name
1)		4)	
2)		5)	
3)		6)	·

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	an exchange, reclassification, or cancellation of issued shares, the amendment if not contained in the amendment itself:
(if not appliçable, indicate N	/A)
· · · · · · · · · · · · · · · · · · ·	
e date of each amendment(s) ad	option: November 20th, 2011
ective date <u>if applicable</u> :	
<u></u>	(no more than 90 days after amendment file date)
option of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s)
by the shareholders was/were suf The amendment(s) was/were appr	oted by the shareholders. The number of votes cast for the amendment(s)
by the shareholders was/were suf The amendment(s) was/were appr must be separately provided for e	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval. The shareholders through voting groups. The following statement
by the shareholders was/were suf The amendment(s) was/were appr <i>must be separately provided for e</i> "The number of votes cast fo	bited by the shareholders. The number of votes cast for the amendment(s) ficient for approval. The shareholders through voting groups. The following statement bach voting group entitled to vote separately on the amendment(s):
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CED

(Title of person signing)