## P1100097483

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(Ad	dress)	
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DIVISION OF CORPORATIONS

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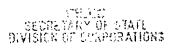


TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: POM CRE	W CENTER INC	
DOCUMENT NUMB	D1100000749		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	condence concerning this ma	tter to the following:	
	HANY AYOUB		
•	POM CREW CEI	Name of Contact Person	1
_	1180 S. AMERIC	Firm/ Company A WAY	
-	Miami, Fla. 33132	Address 2	
	_	City/ State and Zip Code	8
<u>han</u>	y@vgmtel.com E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Hany Ayoub		at (305	905-3415
Name o	f Contact Person	Area Co	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	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



## POM CREW CENTER INC

14 JUN -9 PM 2: 39

to

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

P11000097483		-			
(Document Num	ber of Corporation (if	known)			
Pursuant to the provisions of section 607.1006, I its Articles of Incorporation:	Florida Statutes, this <i>F</i>	Slorida Profit Corpo	<i>ration</i> ado	pts the following	g amendment(s)
A. If amending name, enter the new name of	the corporation:				
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association," of	"Corp," "Inc," or "C	o". A professiona			
B. Enter new principal office address, if appl (Principal office address MUST BE A STREET					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC					
D. If amending the registered agent and/or renew registered agent and/or the new regis		ess in Florida, enter	the name	of the	
Name of New Registered Agent					
	(Florida stre	et address)			
New Registered Office Address:	(City)		, Florida	(Zip Code)	
New Registered Agent's Signature, if changin	o Registered Agent			•	
I hereby accept the appointment as registered as		ith and accept the of	bligations	of the position.	
Signature	e of New Registered A	gent, 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> <u>Johr</u>	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PTD	Sherif Ayoub	1180 S. AMERICA WAY
Add			Miami, Fla 33132
Remove			
2) Change	PTD	Hany Ayoub	1180 S. AMERICA WAY
Add			Miami, Florida 33132
Remove			
3) Change	VP/D	Phillip Joffey	1180 S. AMERICA WAY
Add			Miami, Florida 33132
Remove			
4) Change			-
Add			·
Remove			
5) Change			
Add			<del> </del>
Remove			
6) Change	<del></del>		
Add			
Remove			

	icles, enter change(s) here: (Be specific)
	·
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nument it not contained in the amendment useri:
<u>provisions for implementing the ame</u> (if not applicable, indicate N/A)	nument it not contained in the amendment usen:
provisions for implementing the ame	

The date of each amendment(s) adoption: May 28, 2014	, if other than the
date this document was signed.  SECTION OF CHIEF CHAPTER OF CHA	6083
mee u 1 1 10 11 11 MAV 28 2014	
(no more than 90 days after amendment file	date)
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendments.	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
by"  (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action a action was not required.	nd shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shaction was not required.	nareholder
Dated May 28,72074	
Signature (By a director, president or other officer – if directors or officers h	ave not heen
selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	
Sherif Ayoub	
(Typed or printed name of person signing	g)
President	
(Title of person signing)	مية هيم
	<b>&gt;</b>
	30 HF

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