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(R	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corp	porations			
NAME OF CORPO	RATION: AFRICAN DY	NASTY EMPIRE INC	CORPORATED	
DOCUMENT NUM	IBER: P12000001	112		
The enclosed Articles	s of Amendment and fee are su	abmitted for filing.		
Please return all corre	espondence concerning this ma	atter to the following:		
	LEHENRY BA	KER		
	AEDICAN DVNAS	Name of Contact Person	•	
	AFRICAN DYNAS		RECKATED	
	1307 HISTOR	Firm/ Company IC GOLDSBO	RO BLVD	
		Address		
	SANFORD FL	32771		
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Cod	e	
AF	DEMLIVE.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
RHADEIJA	RHADEIJAH MANUEL at (407) 5361574			
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department 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)	
Mailing Address		Street Address		
Amendment Section Division of Corporations		Amendment Section 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**

AFRICAN DYNASTY EMPIRE INCORPORATED

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

P12000001112

(Document Number of Corporation (if known)

To the state of th Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

ne must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abore, "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must of "chartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable; incipal office address MUST BE A STREET ADDRESS) Enter new mailing address if applicable; (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in/Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent New Registered Office Address: (Florida street address) New Registered Office Address: (City) (Zip Code)	e.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must cored," "professional association," or the abbreviation "P.A." principal office address, if applicable: ice address MUST BE A STREET ADDRESS) w mailing address, if applicable: iddress MAY BE A POST OFFICE BOX) ing the registered agent and/or registered office address in/Florida, enter the name of the cered agent and/or the new registered office address: c of New Registered Agent (Florida street address) Registered Office Address: (City) (City)		N/FC) 		 :
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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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	V	RHADEIJAH MANUEL	1307 HISTORIC
Add			GOLDSBORO BLVD.
Remove			SANFORD, FL 32771
2) Change			
Add			<u></u>
Remove			
3) Change			
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amendment provides for an exchange, reclassification, or cancellation of issued shares, disjons for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	ach additional sh	ing additional Artic eets, if necessary).	(Be specific)	<u>191 11VI V</u> .		
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The date of each amendment(s) ad date this document was signed.	option;	, if other than the
•		
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 adopty the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast i	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder	
selected	rector, president or other officer if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	_
1	LEHENRY BAKER	
-	(Typed or printed name of person signing)	
<u> </u>	PRESIDENT	_
	(Title of person signing)	