P12000011749





700223083847

02/29/12--01006--003 **43.75

TOWN TO THEST PAINT AND SEAL THE SEAL T

760



T. LEMIEUX

COVER LETTER

Division of Corporations NAME OF CORPORATION: SIC INUESTIGATIONS ING. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CAROLE B. MELENDEZ
Name of Contact Person TUUESTILATIONS
Firm/Company GOLF POWTE CIRCLE TAMARAC, FL 3332 City/ State and Zip Code For further information concerning this matter, please call: CAZLOS J. MELEUDEZ
Name of Contact Person at (954) 726-2333 Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & □ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

ı.

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

SIC INVESTIB		INC.	
(Name of Corporation as currently file	d with the Florida Dept. o	of State) .	
(Document Number of C	749		
,	•	. C	C-11i
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this Fiorida Projit	Corporation adopts the i	ollowing amendment(s) to
A. If amending name, enter the new name of the corp	poration:		
NÁ			The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A profe	v," or "incorporated" o exsional corporation nam	r the abbreviation e must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	<u> </u>	<u> </u>	<u> </u>
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4 M		
-			
D. If amending the registered agent and/or registered	d office address in Florida	o enter the name of the	
new registered agent and/or the new registered of	fice address:	.,	
Name of New Registered Agent	/ A		
	(Elevidu etwent address)		
	(Florida street address)	m : 1	
New Registered Office Address:	(City)	, Florida(Zip C	'ode)

New Registered Agent's Signature, if changing Registered Agent:

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, 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	$\underline{\mathbf{V}}$	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	V	CAROLE B. MELENDEZ	TAMAMAC, FL. 33321
2) Change Add Remove	工	CAROLE B. MELENDEZ	TAMARAC, FL.
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

(attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)			
NA				
•				
If an amendment provides for an exchaprovisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, induced in the amendment itself:			
NA				
	· · · · · · · · · · · · · · · · · ·			

The date of each amendment(s) ac	doption:
Effective date if applicable:	FE,B 27 2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
Adoption of Amendment(s)	(CHECK GIVE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved 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	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated_F&	3 27, 2012
Signature	arlos Alekender
selecte	director, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court
appoin	ted fiduciary by that fiduciary)
	CARLOS J. MELENDEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)