P12000018373

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BLUE BOX WA	ATER INC.
DOCUMENT NUMBER: P12000018373	
The enclosed Articles of Amendment and fee are sul	bmitted for filing.
Please return all correspondence concerning this mat	tter to the following:
VIK PARTI	
	Name of Contact Person
THE LAW OFFICE OF	VIK PARTI PA
<u> </u>	Firm/ Company
7380 SAND LAKE RO	AD STE 500
	Address
ORLANDO, FLORIDA	32819
<u> </u>	City/ State and Zip Code
VPARTI@PARTIPA.COM E-mail address: (to be us	sed for future annual report notification)
VIK PARTI	_{at (} 321 ₎ 297-8756
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address 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 to Articles of Incorporation of



(Name of Corporation as current	tly filed with the Florida Dept. of St	nte) 9,29
P12000018373		
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florts Articles of Incorporation:	orida Statutes, this Florida Profit Cor	poration adopts the following amendment(s)
A. If amending name, enter the new name of th	he corporation:	
BLUEBOX WATER INC.		The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp," "Inc," or "Co". A profession	
B. Enter new principal office address, if applic (Principal office address <u>MUST BE A STREET</u>)		
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE</u>	<u>BOX</u>)	
D. If amending the registered agent and/or reg new registered agent and/or the new registe Name of New Registered Agent		ter the name of the
Halle of Hall Andrews		
	(Florida street address)	
New Registered Office Address:	(Florida street address)	. Florida

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

uttach additional s	sheets, if necessary)	rticles, enter cha). (Be specific)				ماريي المارات
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an amendment	provides for an ex	change, reclassif	ication, or ca	ncellation of he amendme	issued share nt itself:	·S-
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(if not applica	able, indicate N/A)	ANGINE IL INVE	Contained in t		•	

The date of each amendment(s) a	doption: 06/04/1	1
Effective date <u>if applicable</u> :	0610411	L ys after amendment file date)
	(no more than 90 da	ys after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The nur officient for approval.	nber of votes cast for the amendment(s)
	proved by the shareholders through each voting group entitled to vote	voting groups. The following statement separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were su	fficient for approval
by	(voting group)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)	
 The amendment(s) was/were add action was not required. The amendment(s) was/were add action was not required. 		out shareholder action and shareholder
•	6/4/12	
Signature	20	
		if directors or officers have not been
selected appoint	d, by an incorporator – if in the har ted fiduciary by that fiduciary)	nds of a receiver, trustee, or other court
	ZAHID S. MITHA	
	(Typed or printed name	e of person signing)
	PRESIDENT	
	(Title of person sign	ina