P1200033386

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
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> SLUBLIARY OF STATE DIVISION OF CORPORATIONS

C.Lew: 54

COVER LETTER

TO: Amendment Section Division of Corporations	s				
NAME OF CORPORATIO	N: RANGAS	INC			
DOCUMENT NUMBER: _	P120000333	3 8 6			
The enclosed Articles of Ame	The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all corresponder	Please return all correspondence concerning this matter to the following:				
	BRIT	Name of Contact Person	E.S.		
			1		
	NANG	AS INC Firm/ Company			
	5 South	YOUNG STREE	:T		
- • , · ,		Address			
	Demons B	EACH, FL-3.	2174		
	<u> </u>	City/ State and Zip Code			
Hosogon @ yahoo Com E-mail address: (to, be used for future annual report notification)					
E-mail address: (to, be used for future annual report notification)					
For further information concerning this matter, please call:					
BRITO RODA	LIGUES	at (217	415-7379		
Name of Contact Person 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 & 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 A		Street	Address		
Amendmen		Amendment Section			
Division of Corporations Division of Corporations 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



of		
KANGAS INC	14 NOV	12 64
(Name of Corporation as currently filed with the F	`~~~~~~``	•
P 12000033386		
(Document Number of Corporation (i	f known)	-
suant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following	g amendm
If amending name, enter the new name of the corporation:		
		_The nev
ne must be distinguishable and contain the word "corporation orp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "ded contains" or the abbreviation "	Co". A professional corporation name must of	
Enter new principal office address, if applicable:	N/A	
incipal office address <u>MUST BE A STREET ADDRESS</u>)	- 1	
		-
		-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA.	
(Maning university MAT BE A POST OFFICE BOX)		•
		-
		-
If amending the registered agent and/or registered office addr	ress in Florida, enter the name of the	
If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address		
new registered agent and/or the new registered office address Name of New Registered Agent	<u> </u>	
new registered agent and/or the new registered office address Name of New Registered Agent		
new registered agent and/or the new registered office address Name of New Registered Agent	eet 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 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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	BRITO RODRIGUES	5. South Young ST
Add			ORMOND BEACH
Remove			FL- 32174
2) Change		RAO S. JUYVADI	972 SANDALWOOD DR
Add			PORT ORANGE, FL
Remove			32127.
3) Change			***************************************
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	····	<u> </u>	
Add			
Remove			

	(Be specific)
	
	-
	
	nange, reclassification, or cancellation of issued shares,
rovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an indication of issued shares, and ment if not contained in the amendment itself:
rovisions for implementing the ame	

The date of each amendment(s) adoption:	07 10	0/14	SLORE TARY	OF STATE
date this document was signed.	l	•	DIAI2IOU OL CO	
Effective date if applicable:	07/10	<u> </u>	14 NOV 12	다는 2: 35
	(no more the	an 90 days after a	mendment file date)	
Adoption of Amendment(s) (CI	IECK ONE)			
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		The number of vo	otes cast for the amendme	ent(s)
The amendment(s) was/were approved by the must be separately provided for each voting				ement
"The number of votes cast for the ame	ndment(s) was	/were sufficient fo	or approval	
by			.,,	
(vo	ting group)			
The amendment(s) was/were adopted by the action was not required. The amendment(s) was/were adopted by the				
action was not required.	vo.po.usors			
Dated July		7/10/2	2014	
Signature	<u> </u>	1011 CC	20)4	
· · · · · · · · · · · · · · · · · · ·	sident or other	officer – if directo	ors or officers have not be	een
selected, by an inc appointed fiduciar			eceiver, trustee, or other o	court
RAO	S. F	UVVADI		
(Typed or printed name of person signing)				
V. PRESIDENT				
		(Title of person s	igning)	