## P12000038814

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DX2 8/7/14

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:ICO	MACONS INC.				
DOCUMENT NUM	MBER: P12000038	814				
The enclosed Article	es of Amendment and fee ar	e submitted for filing.				
Please return all corr	respondence concerning this	matter to the following:				
		Mr. Fabrizio Clanci	o			
		Name of Contact Pers	son			
	ICOMACONS INC.					
		Firm/ Company				
	1057 Calumet st,					
	Address					
	Clearwater, FL - ZIP Code 33755					
		City/ State and Zip Co	de			
		icomacons@gmail.co	om			
	E-mail address: (to be	used for future annual repor	notification)			
Pag Guithan Indonesia	- aanaamina thia mattau ala	vaa valt.				
POT TUTTING INTOFMATIO	n concerning this matter, ple	ase can:				
Mr. Fabrizio Ciancio		at (727	de & Daytime Telephone Number			
Name o	l'Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment 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 Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building				
Tallahassee, FL 32314		2661 Ex	ecutive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to

Articles of Incorporation

FILED

2014 JUL 28 PM 4: 21 ICOMACONS, INC. MANGETHINY OF STATE (Name of Corporation as currently filed with the Florida Dept. of State)

ent(s) to

P12000038814		TALL	AHASSEENFLORIDA
(Document Nun	nber of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Flo	orida Profit Corporation add	opts the following amendme
A. If amending name, enter the new name of	the corporation:	N/A	The nev
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "Co	". A professional corporal	ated" or the abbreviation
B. Enter new principal office address, if applicable:		1057 Calumet st,	
(Principal office address <u>MUST BE A STREE</u>		Clearwater, FL, 33755	
C. Enter new mailing address, if applicable: (Mulling address MAY BE A POST OFFICE BOX)		1057 Calumet s	t,
		Clearwater, FL, 33	3755
D. If amending the registered agent and/or r new registered agent and/or the new regis		in Florida, enter the name	e of the
Name of New Registered Agent	N/A		
	N/A		
	(Florida street	address)	
New Registered Office Address:	N/A	, Florida	N/A
	(City)		(Zip Code)
New Registered Agent's Signature, if changing the hereby accept the appointment as registered a	ng Registered Agent: gent. I am familiar with	and accept the obligations	of the position.
	N/A		
Sionatur	e of New Revistered Age	nt. 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.

X Change	PT John	Doe	
X Remove	Y <u>Mike</u>	: Jones	
X Add	SV Sally	Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	RICCARDI, TERESA	1124 SUNSET PT DR
Add			UNIT 301
Remove			CLEARWATER, FL. 33755 US
2) Change	Р	CARLO CHIARELLI	1057 CALUMET ST,
X_Add			CLEARWATER, FL, 33755 US
Remove			
3) Change	T	FABRIZIO CIANCIO	1057 CALUMET ST,
X_Add			CLEARWATER, FL, 33755 US
Remove			
4) Change	Parameter Section (Control of Control of Con		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

16 jul 2014	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable: 25 Jul 2014  (no more than 90 days after amendment file date)	
(no more than 90 adys after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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 adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 16 50/2014	
Signature Corto Chronelle	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
CARLO CHIARELLI	
(Typed or printed name of person signing)	<del></del>
PRESIDENT	_
(Title of person signing)	