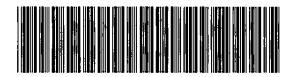
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14 MAY -9 PM L: L3
SECRETARY OF STATE
TALE ABASSIFE FLORID.

ATTROVED AND FILED

C. LEWIS 21 2014
EXAMBIER

COVER LETTER

TO: Amendment Sec Division of Corp			
NAME OF CORPO	RATION: FRICAL GE	ROUP, CORP.	
DOCUMENT NUM	_{BER:} P1200061197		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	DORYS MARTIN	IEZ	
		Name of Contact Person	
	BUSINESS CON	SULTING & SO	LUTIONS INC.
_		Firm/ Company	
•	7222 SPIKERUS	H LANE	
	WWITED CARRE	Address	
	WINTER GARDE		4 14 14 14 14 14
		City/ State and Zip Cod	e
DN	1ACCOUNTING20	001@YAHOO,C	OM
		sed for future annual report	
For further information	on concerning this matter, pleas	se call:	
DORYS MAI	RTINEZ	at (407	6565015
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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
Tallahassee, FL 32314

Street Address

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

APPRUAL AND FILED

Articles of Amendment to Articles of Incorporation of

14 MAY -9 PM 4: 43

SECRETARY OF GUARD TALLAHASSIELFLORIDA

FRICAL GROUP, CORP.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P12000061197	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following an its Articles of Incorporation:	nendment(s) to
A. If amending name, enter the new name of the corporation:	
	e new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbre "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contword "chartered," "professional association," or the abbreviation "P.A."	viation tain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. 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	
(Florida street address)	
New Registered Office Address: , Florida	
(an)	
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 <math>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)	Title	<u>Name</u>	Address
1) Change	Р	FRANCO TUCCIARELLI	12757 CALDERDALE AVE
Add			WINDERMERE FL
Remove			34786
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Aðd			
Remove			
5) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
•	
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	



14 MAY -9 PM 4: 43

The date of each amendment(s) adoption: 04/30/2014 _, if other than the SECRETARY OF STATE date this document was signed. TALLAHASSEE, FLORIDA 05/01/2014 Effective date if applicable: (no more than 90 days after amendment file date) (CHECK ONE) Adoption of Amendment(s) The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 (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 04/3082014 Signature > (By a director, preside ent 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) FRANCO TUCCIARELLI (Typed or printed name of person signing) PRESIDENT (Title of person signing)