P120000(0325)

(Re	questor's Name)	
. (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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AUG 17 2012

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>K</u>	ONK DIS	TRIBUTORS, IN	C.
	00006325		
The enclosed Articles of Amendme	nt and fee are su	: bmitted for filing.	
Please return all correspondence co	ncerning this mat	tter to the following:	•
ISAAC	SCHWED		
		Name of Contact Person	
KONK	DISTRIBU	ITORS, INC.	•
<u> </u>		Firm/ Company	· · · · · · · · · · · · · · · · · · ·
3301 N	E 5TH AV	E. APT. 1218	
		Address	
MIAMI,	FL 33137	,	
- 1 - 1		City/ State and Zip Code	
schwedisa	ac@me.co	om	
		sed for future annual report	notification)
F - 6 - 1 - 2 - 5			
For further information concerning	this matter, picas	se can:	
ISAAC SCHWED		_ at (267	283-7834
Name of Contact Pe	erson	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following	ng amount made	payable to the Florida Depa	ertment of State:
	5 Filing Fee & Greate 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 Addres Amendment Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion orations	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Insec, FL 32301

Articles of Amendment

KONK DISTRIBUTORS, INC.

Articles of Amendment
to
Articles of Incorporation
of

OISTRIBUTORS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

mendment(s) to

P12000063256		45.5
(Docume	nt Number of Corporation	(if known)
Pursuant to the provisions of section 607. is Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corporation adopts the following
. If amending name, enter the new na	ame of the corporation:	•
ime must be distinguishable and con Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	iation "Corp," "Inc." or	ion," "company," or "incorporated" or the ab "Co". A professional corporation name must c a "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		3301 NE 5TH AVE. APT. 1218
		MIAMI FL 33137
1 Date 12 11 16 1		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3301 NE 5TH AVE. APT. 1218
		MIAMI FL 33137
. If amounting the number of a country of the second of		
new registered agent and/or the new	id/or registered office addre	dress in Florida, enter the name of the
Name of New Registered Agent	ISAAC SCHWED	
	3301 NE 5TH	AVE. APT. 1218
	(Florida .	street address)
New Registered Office Address:	MIAMI	, Florida 33137
	(Cir	(V) (Zip Code)

Page 1 of 4

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> <u>John</u>	Doe	•
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>P</u>	JACOBO SCHWED	601 GARFIELD STREET
Add			HOLLYWOOD, FL 33021
X Remove		,	
2) Change	VP T	SUSANA SCHWED	601 GARFIELD STREET
Add	*****	44.00	HOLLYWOOD, FL 33021
X		•	
3) Change	<u>P</u>	SARA ATAIE	3301 NE 5TH AVE. APT. 1218
X Add		,	MIAMI FL 33137
Remove			
4) Change	Т	ISAAC SCHWED	3301 NE 5TH AVE. APT. 1218
X Add			MIAMI FL 33137
Remove			
5) Change	·		
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Artitach additional sheets, if necessary).	(Be specific)		
		,	

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	- A - A - A - A - A - A - A - A - A - A		
**************************************			***
			<u></u>
f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or condition or condition in	ancellation of issued the amendment itse	shares, f:

The date of each amendmen	t(s) adoption: U//Z//ZU1Z
Effective date <u>if applicable</u> :	07/27/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
Dated 07/	/27/2012
. Signature _	Mo-:
S	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	ISAAC SCHWED
	(Typed or printed name of person signing)
	TREASURER
	(Title of person signing)