## P12000094494

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

1		
NAME OF CORPORATION: WAROONORY INC		
DOCUMENT NUMBER: P12000094494		
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
WARDONORN JUNTAIN		
Name of Contact Person		
Name of Contact Person  WARON YORY  Firm/ Company		
6233 14 ST W Address		
BRADENTON FL 34201 City/ State and Zip Code		
City/ State and Zip Code		
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:		
WARDONORN JUNTAIN at ( 941 ) 914-6378  Name of Contact Person Area Code & Daytime Telephone Number		
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:		
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  \$52.50 Filing Fee Certificate of Status  Certified Copy (Additional Copy is enclosed)		
Mailing Address Street Address		
Amendment Section Amendment Section		
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building		
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle		

Tallahassee, FL 32301

## **Articles of Amendment**

	to		
1 1	Articles of Incorporati	on	( 2 )
1/2011			
WARDONO			
(Name of Corporation as curren			
	1000 944 99		
(Document Numb	per of Corporation (if known)		
rsuant to the provisions of section 607.1006, F Articles of Incorporation:	lorida Statutes, this <i>Florida i</i>	Profit Corporation adop	ts the following amendment(
If amending name, enter the new name of t			
THAT	PICE IT	*C	The new
Corp.," "Inc" or Co.," or the designation " ord "chartered," "professional association," o		professional corporatio	n name must contain the
Enter new principal office address, if appli- rincipal office address <u>MUST BE A STREET</u>	cable: ADDRESS )		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>E BOX</u> )		
If amending the registered agent and/or reg	wistered office address in Fl	orida enter the name (	of the
new registered agent and/or the new register		bittaat ciitet the name c	71 the
Name of New Registered Agent			
Nume of New Negisterea Agent			
****	(Florida street addres	s)	
New Registered Office Address:		, Florida	
New Registered Office Address.	(City)	, i ionua	(Zip Code)
		•	
w Registered Agent's Signature, if changing	Registered Agent:		
ereby accept the appoi <mark>ntment as registered age</mark>	ent. I am familiar with and c	iccept the obligations of	the position.
Signature	of New Registered Agent, if c	hanging	

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:	, ини Бин	n Smain, St as an Maa.	
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>	<u>Name</u>	Address
1) Change	<del></del>		
Add Remove			
2) Change			
Add			
Remove			
3) Change	<del> </del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		·	

tach additional sheets, if necessary).	(Be specific)
	ange, reclassification, or cancellation of issued shares.
ovisions for implementing the ame	ndment if not contained in the amendment itself:
ovisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
ovisions for implementing the ame	ndment if not contained in the amendment itself:
ovisions for implementing the ame	ndment if not contained in the amendment itself:
ovisions for implementing the ame	ndment if not contained in the amendment itself:
ovisions for implementing the ame	ndment if not contained in the amendment itself:
ovisions for implementing the ame	ndment if not contained in the amendment itself:
ovisions for implementing the ame:  (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
ovisions for implementing the ame:  (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.	/ /	
Effective date if applicable:	07/16/2014	
	(no moré than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	01/16/2014	
Signature		
selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	WARONYORY JUNTAIN (Typed or printed name of person signing)	<del></del>
	PRESIDENT	
•	(Title of person signing)	<del></del>