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(Re	questor's Name)	•
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(Cid	ty/State/Zip/Phone	: #)
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TABLE LAST OF STATES
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OCT. 7 2014 R. WHITE

COVER LETTER

JS24 INC					
211					
e submitted for filing.					
matter to the following:					
FFLER					
Name of Contact Persor	1				
DUNTING, INC.					
Firm/ Company					
BEACH ROAD, SU	JITE 1-3				
Address					
<u> </u>					
City/ State and Zip Code					
LURETAX.COM					
e used for future annual report	notification)				
olease call:					
_{at (} 239	992 3355				
Area Co	de & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:					
& \$\square\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Street Address Amendment Section					
	Name of Contact Person DUNTING, INC. Firm/ Company BEACH ROAD, SU Address NGS, FL 34134 City/ State and Zip Code LURETAX.COM e used for future annual report Clease call: at (239 Area Co de payable to the Florida Depayable to the Florida Depayable to the Florida Depayable to the Florida Copy (Additional copy is enclosed)				

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation

FILED

14 SEP 26 AN II: 10

	of	and and a second of the second of the second of the
WEBPLUS24 INC		SECRETARY OF STATES A West Secretary
(Name of Corporation as	s currently filed with the Florida De	ept. of State)
P12000103211		
(Documen	nt Number of Corporation (if known)	
ursuant to the provisions of section 607. s Articles of Incorporation:	.1006, Florida Statutes, this <i>Florida P</i>	Profit Corporation adopts the following amendmen
. If amending name, enter the new na	ame of the corporation:	
		The new
	nation "Corp," "Inc," or "Co". A p	npany," or "incorporated" or the abbreviation professional corporation name must contain the
 Enter new principal office address, Principal office address MUST BE A S 		
<u></u>	 -,	
C. Enter new mailing address, if appl	icable:	
(Mailing address MAY BE A POST		
 If amending the registered agent ar new registered agent and/or the ne 		orida, enter the name of the
	ALLURE ACCOUNTIN	NG, INC.
Name at New Registered Agent		
Name of New Registered Agent	3665 BONITA BEACH RO	OAD. STE 1-3
<u>Name of New Registered Agent</u>	3665 BONITA BEACH RO	<u> </u>
Name of New Registered Agent New Registered Office Address:		<u> </u>

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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jor	<u>nes</u>	
X Add	<u>sv</u>	Sally Sm	<u>iith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	Р		ADISSON, FRANCK N	c/O Webpluszy Inc
Add Remove				260 <u>Crandon Blvd Ste 32</u> # 440 Key <u>Biscayne</u> , FL 33149
2) Change	S	_	ADISSON, FRANCK N	c/o Webpluszy Inc
Add				260 Crandon Blvd Ste 32 #440
Remove 3) Change				Key Biscayne, FL 33149
Add				
Remove				
4) Change				
Remove				
5) Change				
Add Remove				
6) Change				.
Add				
Remove				

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	<u></u>
	·
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
· · · · · ·	

The date of each amendment date this document was signed.		if other than th
Effective date if applicable;	17 SEPTEMBER, 2014	
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
The amendment(s) was/ver must be separately provide	e approved by the shareholders through voting groups. The following statement of 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)	
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/ver action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated 17 S	EPTEMBER, 2014	
Signature	Enol Adyss	_
	y a director, president or other officer - if directors or officers have not been lected, by an incorporator - if in the hands of a receiver, trustee, or other count	
	pointed fiduciary by that fiduciary)	
	FRANCK ADISSON	
	(Typed or printed name of person signing)	
	P	
	(Title of person signing)	