P13000000009

(Requestor's Name)
(Address)
(Address)
(ladioss)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000243916900

01/28/13--01025--030 **35.00

13 JAN 28 PM 2: 30

Amend

JAN 3 1 2013 T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Wholesale Ciocal g Coral Spings Indocument number: 91300000609
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Naver Harif
SHS Accounting & Taxation, Inc
7401 Wiles Rocked, Ste 205
Wal Spring of 33067
City/State and Zip Code Naver Code City/State and Zip Code City/State and Zip Code City/State and Zip Code
For further information concerning this matter, please call:
Name of Contact Person at (954) 509-3741 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 Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

13 JAN 28 PM 2: 32 PM

Articles of Amendment to Articles of Incorporation

Wholesale Civar	1 (dal'	Springo IN	<u>.</u>	PH 2.3
(Name of Corporation as current)	filed with the Flo	rida¹ Dept. o ∜ State)		·
Y 1500000009	F.C			-
(Document Number	of Corporation (if i	(nown)		
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this <i>Fl</i>	orida Profit Corporation ac	lopts the followin	g amendment(s) to
A. If amending name, enter the new name of the	corporation:			
				The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or t	orp," "Inc," or "Co	o". A professional corpora		
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	ble: DDRESS)			-
				-
C. Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFICE</u>)	BOX)			-
				-
D. If amending the registered agent and/or registered agent and/or the new registered		s in Florida, enter the nan	<u>se of the</u>	
Name of New Registered Agent				
	(Florida stree	address)		
New Registered Office Address:		, Florida		
	(City)		(Zip Code)	-
New Registered Agent's Signature, if changing F	Pagistarad Agants			
I hereby accept the appointment as registered agen		h and accept the obligation	s of the position.	
•				
Signature of	New Registered Ag	ent. 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.

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) 1) Change	<u>Title</u>	Name Nawar) Haril	Address 7401 () les Rose)
Add Remove			Ste 200, local Springs. 33007
2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

If amending or adding additional Artic Attach additional sheets, if necessary).	
	· .
· · · · · · ·	
- · · · · · · · · · · · · · · ·	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each amendment(s) adoption: 1222013
Effective date if applicable: 1222013
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
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 an endment(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)
(voung 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_1 13 2013 Signature
(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)
Nauced Hanit
(Typed or printed name of person signing)
Yesident
(Title of person signing)