P13000031815

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOI	RATION: Florida Dev	elopment Group	o, Inc.		
DOCUMENT NUMBER: P13000031815					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Ross P. Beckerm	an			
		Name of Contact Person	n		
	Tim A. Shane P.A.				
		Firm/ Company			
	5301 N. Federal	Highway, Ste. 1	30		
		Address			
	Boca Raton, FL 3	33487			
		City/ State and Zip Cod	e		
ros	s@timashane.cor	n			
		sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
Ross P. Beckerman at (561) 886-5580					
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check fo	r 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		Amend Divisio	Address Iment Section on of Corporations		
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle					
i aii	anassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			

Articles of Amendment to **Articles of Incorporation** of

(Name of Corneration as	oup, inc. s currently filed with the Fl	orida Dept. of State)	· <u></u>	_
P13000031815	s currently fried with the Fi	orida isept. or state)		
(Docume	nt Number of Corporation (if	known)		-
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation	adopts the following	ig amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
	_			_The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	Co". A professional corpe		
B. Enter new principal office address, (Principal office address MUST BE A S				-
				_
C. Enter new mailing address, if appli (Mailing address MAY BE A POST				_
				_
				_
D. If amending the registered agent an new registered agent and/or the new			ame of the	
Name of New Registered Agent				
	5301 N. Federal	Hwy., Ste 130		
	(Florida stre	,		
New Registered Office Address:	Boca Raton	, Florid	_{da} 33487	_
	(City)		(Zip Code)	₹ des
New Registered Agent's Signature, if c	hanging Registered Agent:			SEURE I
I hereby accept the appointment as regist			ons of the position.	ARY OF
Si	gnature of New Registered A	gent, 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: XChange	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	nit <u>h</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	D		Gennadii Butkevych	225 NE Mizner Blvd. Ste. 6
Add				Boca Raton, FL 33432
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add	<u></u>	_		
Remove				

tach <i>additional she</i>	ets, if necessary). (Be specific)
······································	
	·
<mark>f an amend</mark> ment pro	ovides for an exchange, reclassification, or cancellation of issued shares,
<u>provisions for imple</u>	ementing the amendment if not contained in the amendment itself:
(if not applicable	e, indicate N/A)

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved 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 f	or the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
The amendment(s) was/were adopaction was not required.	oted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoptaction was not required.	oted by the incorporators without shareholder action and shareholder	
Dated March 6,	2014	
Signature	Benj	
	rector, president or other officer - if directors or officers have not been	
	, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
;	Zoran Zelenikovski	
-	(Typed or printed name of person signing)	
	President	
-	(Title of person signing)	