## P13000032196

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## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations Cash Genie, Inc. NAME OF CORPORATION: P13000032196 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sergiu Liveanu
Name of Contact Person Name of Contact Person

Cash Genie Inc.

Firm/Company

437 Golden Isles Dr. #166

Address

Hallandale Beach, FL 33009

City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

Cash Genie Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P 130000 32196 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent 437 Golden Isles Dr. #16 E

(Florida street address) Hallandale Beach, Florida 33009 New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

> SECRETARY OF STATE TALL AHRÉSEE, PLORIDA

SE: 4 Hd SI 701 EIOZ

## 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	PT John	n Doe		
X Remove	<u>V</u> <u>Mik</u>	Mike Jones		
X Add	SV Sall	y Smith		
Type of Action (Check One)	<u>Title</u>	Name	Address	
1) Change	P	Robert Liveanu	437 Golden Isles Dr. #16E	
AddRemove			Hallandale, FL 33009	
2) Change Add	<u>P</u>	Sergiu Liveanu	437 Golden Isles Dr. #166 Hallandale, FL 33009	
Remove 3) Change Add	***************************************	4		
Remove 4) Change Add				
Remove				
5) Change Add				
Remove				
6) Change Add				
Remove				

. If amending or adding additional Art	ticles, enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
N/A	
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	change, reclassification, or cancellation of issued shares,
	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
All 100 shares	of the corporation are
1 -1 - 6	of the corporation are erred from the outgoing
Dresident - R-hort	Liveanu to the incoming
TESIMENC RESCIE	Election to the incomment
President - Sergiu	a liveanu
4	
<u> </u>	
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The date of each amendment(s) adoption: July 12 Zo13 date this document was signed.	, if other than the
Effective date if applicable:	<del></del>
(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 amendment(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)	
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 7/12/13	
Dated / /	
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)	
appointed inductary by that inductary)	
Robert Liveanu	
(Typed or printed name of person signing)	
President	
(Title of person signing)	<del></del>