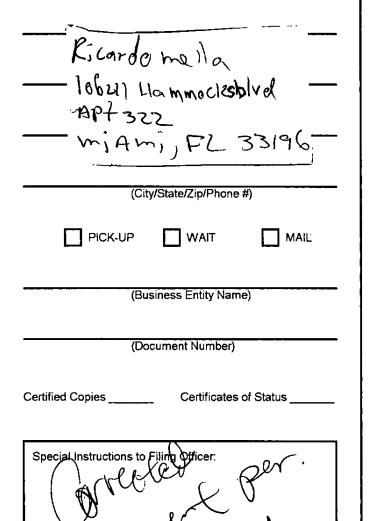
## P13000045655



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED 13 NOV 18 PH 2: 49

DIVISION OF CURPORATIONS TALL AHASSEE, FLORIDA

October 30, 2013

RICARDO MELLA 10641 HAMMOCKS BLVD. SUITE 322 MIAMI, FL 33196 (347) 849-9488

SUBJECT: SUSNHINE SMARTHOMES AND SECURITY INC

Ref. Number: P13000045655

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell Regulatory Specialist II

Letter Number: 513A00025349

## Articles of Amendment to Articles of Incorporation

of	, portuge
	C. I Security Too
SUSNHING Smart Homes  (Name of Corporation as currently filed with the File	orida Dent. of State)
P13000045655	VIVE COPI VI SUITE
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this I	Florida Profit Corporation adopts the following amendment(s) to
its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:  SUNSKING Smarthows & aname must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	10641 Hammouk blud APT 322 miami, FL, 33196
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10641 Hammock blvd AP+ 322 miami, FL, 33196
D. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent Ricardo mel	
10641 Hammoul	ML APT 300
New Registered Office Address: Mi Ami (City)	, Florida 33196 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar w  Signature of New Registered A	

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 Doe	
X Remove	Y	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1)Change		<u> </u>	
Add			
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			·
Remove			
4) Change			
Add			
Remove			
5) Changa			
5) Change			
Add		•	
Remove			· · · · · · · · · · · · · · · · · · ·
6)Change			
Add			
Pamova			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (If not applicable, indicate N/A)	(Attach additional	theets, if necessary). (Be specific)
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)		<u>/</u> /
(if not applicable, indicate N/A)	N/	<u>/</u> †
(if not applicable, indicate N/A)		<u> </u>
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)	<u></u>	
(if not applicable, indicate N/A)	· · · · · · · · · · · · · · · · · · ·	
(if not applicable, indicate N/A)		
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(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)	7. If an amendment	provides for an exchange, reclassification, or cancellation of issued shares,
N/A	(if not applic	able, indicate N/A)
		N/A

The date of each amendment(s) ad date this document was signed.	option: 10-20-13	, if other than the
Effective date if applicable:	10-20-13	
	(no more than 90 days after amendment ,	file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopty the shareholders was/were suf	oted by the shareholders. The number of votes cast for ficient for approval.	the amendment(s)
	oved by the shareholders through voting groups. The each voting group entitled to vote separately on the an	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	1	"
,	(voting group)	
The amendment(s) was/were adopaction was not required.	eted by the board of directors without shareholder action	on and shareholder
☐ The amendment(s) was/were adoption was not required.	sted by the incorporators without shareholder action ar	nd shareholder
Dated	20-13	
Signature	don	
selected	rector, president or other officer – if directors or office, by an incorporator – if in the hands of a receiver, trusted fiduciary by that fiduciary)	
-	Ricardo mella (Typed or printed name of person sig	
	OWNER / Pre.S.	ining)
-	(Title of person signing)	