Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000179699 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name

: LEOPOLD KORN & LEOPOLD, P.A.

Account Number: I20010000025

Phone

: (305) 935-3500

Fax Number

: (305)935-9042

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.*

COR AMND/RESTATE/CORRECT OR O/D RESIGN TYCHE VENTURES PROPERTIES, INC.

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Certificate of Statu		0
Certified Copy		0
Page Count		01
Estimated Charge		\$35.00

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850-617-6381

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August 13, 2013

FLORIDA DEPARTMENT OF STATE

Division of Corporations

TYCHE VENTURES PROPERTIES, INC. 1835 NE MIAMI GARDENS DRIVE #224 NORTH MIAMI BEACH, FL 33179US

SUBJECT: TYCHE VENTURES PROPERTIES, INC.

REF: P13000052153

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

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 FAX Aud. #: #13000179699 Letter Number: 313A00019380

#130001796415

COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: Tyche Vo	entures P	roperties, Inc.
P1300052	2153	
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are sal	builted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Melissa Sosa, RE Paral	egal	
	(Name of Contact	Person)
Leopold Korn, P.A.		
	(Firm/ Compan	ıy)
20801 Biscayne Blvd., S	Suite 501	
	(Address)	
Aventura, FL 33180		
	(City/ State and Zip	Code)
Msosa@leopoldk	orn.com	
E-read address: (to be used		port notification)
For further information concerning this matter, please	call:	
Melissa Sosa	786	899-2232
(Name of Contact Person)		a Code & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida I	Department of State:
■ \$35 Filing Foe ■\$43,75 Filing Foe &	□\$43.75 Filing Fee	& D\$52.50 Filling Fee
Certificate of Status	Certified Copy	Certificate of Status
	(Additional copy i enclosed)	, -
·	encrosen)	(Additional Copy is Enclosed)
Malian Address	St	an Address
Amendment Section		endment Section
Division of Corporations P.O. Box 6327		ision of Corporations Iton Building
Tallahassee, FL 32314		I Executive Center Circle

Tallahassee, FL 32301

Articles of Ameadment to Articles of Incorporation of

Tyche Ventures Properties, Inc.				
(Name of Corporation as currently fil	led with the Florida	Dept. of State)		
P13000052153				
(Document Number of	Corporation (if know	n)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida	Profu Corporation adopts the i	ollowing amend	lment(s) to
A. If smending name, enter the new name of the con	rporation;			
			The n	iew
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp.," word "chartered," "professional association," or the a	" "Inc," or "Co".	ompany," or "incorporated" of A professional corporation name	the abbreviate must contain	ion the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD)				
				
C. Enter new mailing address, if applicable:				,
(Mailing address MAY BE A POST OFFICE BQ)	9	·		i.
				三 "
				o
D. If amending the registered agent and/or registered new registered of agent and/or the new registered of		lorida, enter the name of the	n - 1	
Name of New Registered Agent	inte adultas.		သီဟ (
Marie Al Lieb Ve Korel and Melii			S A	50
	(Florida street addre	255)	. = .	
New Registered Office Address:		, Florida		
	(City)	(Zip Co	de)	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. 1 of the second	tered Agent: am familiar with and	accept the obligations of the pos	ition.	
Signature of New	Registered Agent, if	changing		

Example:

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 = ChiefExecutive 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, Salty Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Salty Smith, SV as an Add.

X_Change	PT.	John Doc	
X Remove	¥	Mike Jones	
X Add	<u>sv</u>	Saily Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	<u>s</u>	Ana Bores Bermejo_	1835 NE Mlami Gardens Dr., #224
X Add			No. Miami Beach, FL 33179
Remove			
2) Change	·- -		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
6) Change			
Add		,	
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Remove			

	al sheets, if necess	l Articles, enter ary). (Be spec	ific)		
					
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The date of each amendar date this document was sign	ned(s) adoption:ned.	, if other than th
Effective date if applicab	le:	
	(no more than 90 days after amendment file date)	
Adoption of Amendment	(s) (<u>CRECK ONE</u>)	·
	were adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
	were approved by the shareholders through voting groups. The following statement wided for each voting group entitled to vote separately on the amendment(s):	
	oles cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
-, <u>, </u>	(voting group)	
action was not required.	were adopted by the incorporators without shareholder action and shareholder	
DatedSignature	08.19.2013 Dauefflinn	
	(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)	
	Daniel Rieber	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	_

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