P13000011941

| (Re | equestor's Name) | | | |
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R. WHITE

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: ARRATTA DESIGNS INC P13000071941 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: KATERINA ROMANENKO Name of Contact Person ARRATTA DESIGNS INC Firm/ Company Address CAPE CORAL, FL 33914 City/ State and Zip Code arratta@bigmir.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: , 440-5999 KATERINA ROMANENKO Name of Contact Person Area Code & Daytime Telephone Number 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 Certificate of Status Certified Copy (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

FILED

Articles of Amendment to Articles of Incorporation of SECRETARY OF STATE ALLAHASSEE, FLORIDA

ARRATTA DESIGNS INC

| (N) CC 4' | Zla-ida Dant of Stata) |
|--|--|
| (Name of Corporation as currently filed with the F P13000071941 | TOTICA DEPT. OF STATE) |
| (Document Number of Corporation (i | if known) |
| cursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation: | |
| . If amending name, enter the new name of the corporation: | |
| | The new |
| came must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must contain the |
| 8. Enter new principal office address, if applicable: | 4790 S CLEVELAND AVE, #1304 |
| Principal office address MUST BE A STREET ADDRESS) | FORT MYERS, FL 33907 |
| | |
| | |
| . Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 4790 S CLEVELAND AVE, #1304 |
| | FORT MYERS, FL 33907 |
| | |
| | |
| . If amending the registered agent and/or registered office add | ress in Florida, enter the name of the |
| | |
| new registered agent and/or the new registered office address | <u>s:</u> |
| new registered agent and/or the new registered office address | |
| new registered agent and/or the new registered office address Name of New Registered Agent | <u>s:</u> |
| new registered agent and/or the new registered office address Name of New Registered Agent | <u>s:</u> |

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: | ove, and sans | y Direction, Dr. all are read. | |
|-------------------------------|---------------|--------------------------------|-----------------|
| 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) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| i) Change | V | Todd Prait | 3315 SW 11th pl |
| Add | | | cape cosal of |
| Remove | | | 33914 |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | | | | |
|--|--|--|--|---------------------------------------|
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| F. If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A) | nange, reclassification adment if not conta | on, or cancellation nined in the amendr | of issued shares, nent itself: | |
| | | | | · · · · · · · · · · · · · · · · · · · |
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| The date of each amendment(s) ad date this document was signed. | doption: | , if other than the |
|--|--|---------------------|
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | - |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were ado by the shareholders was/were sur | opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval. | |
| | proved 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 | for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| ☐ The amendment(s) was/were ado action was not required. | pted by the board of directors without shareholder action and shareholder | |
| ☐ The amendment(s) was/were ado action was not required. | pted by the incorporators without shareholder action and shareholder | |
| Dated_09/16 | 5/2013 | |
| Signature V | his | |
| sejected | rector, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary) | |
| | KATERINA ROMANENKO | |
| · | (Typed or printed name of person signing) | |
| | PRESIDENT | |

(Title of person signing)