P/3000073055

(Re	equestor's Name)	
(Ad	ldress)	
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: DANIA SHEP INC
DOCUMENT NUMBER: P130000 73055
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
V C N L
Name of Contact Person
Dania Shop Inc
Hoo NW 1st street Address Dania Beach Fl. 33004 City/ State and Zip Code
Address
Dania Beach, Fl 33004
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Yousef Aurash at (554) 309-5972
Name of Contact Person at (554) 309 -5972 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (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

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Articles of Ame	endment	- C - C - C - C - C - C - C - C - C - C
· to		圣台 日
Articles of Incor	poration	2 m
Dania Shoc	Inc.	THE PIN
(Name of Corporation as currently filed with the Flo	rida Dept. of State)	-09
P1300007305	5	至5
(Document Number of Corporation (if k		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>FI</i> its Articles of Incorporation:	orida Profit Corporation adopts th	ne following amendment(s) to
A. If amending name, enter the new name of the corporation:		
name 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 "P.	o". A professional corporation n	The new or the abbreviation ame must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	400 NW 1st & Donic Beach, Fl.	1004 33004
D. If amending the registered agent and/or registered office addressinew registered agent and/or the new registered office address:	ss in Florida, enter the name of th	h <u>e</u>
Name of New Registered Agent Yousef Au	luash	
400 NW 154	street	
New Registered Office Address: (City)	Seach , Florida 33(DOY p Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. Langamilia wi	th and accept the obligations of the	e position
Thereby accept the appointment as registered agent. Transformation with	in and accept the obligations of the	, position.
	199	
Signature of New Registered Ag	ent, 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: 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
1) Change	<u> 1</u> P	Black, Shatoria	2411 Lake Miramar W Miramar, Fl. 33025
Add			Miramar, Fl. 33025
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<u></u>	·	
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
	1 107 (1	
an amendment provides for an excorovisions for implementing the am	nange, reclassification, or cancellation or cancellation of the amer	on or issued snares, adment itself:
(if not applicable, indicate N/A)		
	<u> </u>	

Effective date if applicable:	
Effective date it applicable.	
(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 12/4/13	
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)	
Yousef Ayyash (Typed or printed name of person signing)	
President (Title of person signing)	