P13000090886

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Certified Copies		Certificate	es of Statu	s
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Special Instructions	to Fil	ing Officer:		

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14 JAN -7 PH 3:59 SECRETARY OF STATE FALLAHASSET TECROS

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C. Lewis 14

COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: CARVE INC DOCUMENT NUMBER: P13000090886 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: AMADEO MAZZOLINI Name of Contact Person AMADEO A MAZZOLINI PA Firm/ Company 1849 S OCEAN DR 214 Address HALLANDALE BEACH FL 33009 City/ State and Zip Code aamazzolini@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: AMADEO MAZZOLINI Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 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) Street Address **Mailing Address**

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, Fl. 32301

2661 Executive Center Circle

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Articles of Amendment to Articles of Incorporation of

14 JAN -7 PM 3:59

CARVE INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P13000090886	
(Document Number of Corporation	on (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>:</u>
name must be distinguishable and contain the word "corpor." "Corp" "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviation	or "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>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(muning address MAT DL AT UST OFFICE DOX)	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add	
Name of New Registered Agent	
(Florid	a street address)
New Registered Office Address:	, Florida
	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famil	
	ed Agent, 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	PT	LIDIA CAI	PRIOTTI	1849 S OCEAN DR 214		
Add				HALLANDALE BEACH		
Remove				FLORIDA 33009		
2) Change	PT	MARIA V	TORIJA	16851 NE 23 AVE 519		
Add				MIAMI FL 33160		
Remove						
3) Change	****			 		
Add				All and the desired water the definition of		
Remove						
4) Change			 			
Remove						
5) Change						
Add						
Remove						
6) Change	·					
Add						
Remove						

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	WATER CO.
<u>.</u>	
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If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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		, c in (1)	
The date of each amendment(date this document was signed.	s) adoption: JANUARY 02 2014	14 JAN -7 PM 3: 59	, if other than the
Effective date if applicable:	JANUARY 06 2014	SECNETARY OF STATE	
meetive duit <u>ii applicatore</u> .	(no more than 90 days a	after amendment file date) (1) A	_
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number sufficient for approval.	or of votes cast for the amendment(s)	
	approved by the shareholders through vo I for each voting group entitled to vote sep		
"The number of votes	cast for the amendment(s) was/were suffic	ient for approval	
by	(voting group)	, an	
	(voting group)		
The amendment(s) was/were action was not required.	adopted by the board of directors withou	t shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without sha	reholder action and shareholder	
Dated_01-0.	2-2014		
Signature	96		
(By sel	va director, president or other officer – if ected, by an incorporator – if in the hands pointed fiduciary by that fiduciary)		
	MARIA V TORIJA		
	(Typed or printed r	name of person signing)	
	PRESIDENT		
	(Title of pe	erson signing)	