

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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MAY 12 2014

R. WHITE

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Account Number : I20130000055

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7 SILVER STARS INC.

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14 BAY -9 AN 9: 36 SECRETAL OF LIGHT TALLAHASSEE, FLORIDA

COVERLETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: 7 SILV	ER STARS INC.				
DOCUMENT NUMBER: P14000	006405				
The enclosed Articles of Amendment and Se					
Please return all correspondence concerning	•				
Sin Yo	•				
	Name of Contact Person				
Yo & Co., (CPA				
	Firm/ Company				
8894 N 56	th ST				
<u> </u>	Address				
<u>Temple Te</u>	rrace, FL 33617				
	City/ State and Zip Code				
syo@yocpa.c	om ·				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter	r, please call:				
Sin Yo	at (813) 914-9191 Area Code & Daytime Telephone Number				
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:					
S35 Filing Fee S43.75 Filing F Certificate of St	b the same and the				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahasses, FL 32301				

P. 0047007

Articles of Amendment Articles of Incorporation oſ

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Sc() BALL	RETA AHAS	SEL,	r fil	ATE KIDA	

7 SILVER STARS INC.	
(Name of Corporation as currently filed with the Floric	la Depr. of State)
P1400006405	
(Document Number of Corporation (if kno	own)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Articles of Incorporation:	ida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	•
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". word "chartered," "professional association," or the abbreviation "P.A.	company," or "incorporated" or the abbreviation A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
-	
_	
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)	
Intuing duties MAT BE A POST OFFICE BOX)	
-	
_	
D. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	n Florida, enter the name of the
Name of New Registered Agent LENA SOAD Sh	HEBARO
11621 FORT K	ING RD
(Florida street ad	•
New Registered Office Address: DADA CITY	, Florida 33525-0000
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with a	nd accept the obligations of the position.
lower Sund Alaba	
Signature of New Registered 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.

X Change	PT	John Doe	
X Remove	<u>y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	RABUH, ZAKARYA	3410 HIGH HAMPTON CIR
Add			TAMPA, FL 33610
Remove			
2) Change	Р	LENA SOAD SHEBARO	11621 FORT KING RD
Add			DADE CITY, FL 33525
Remove			
3) Change			
Add			
Remove			
4) Change			white the backs
Add			
Remove			
5) Change	*****		
Add			
Remove			
6) Change			
Add			
Remove			

Attac	ending or adding add h <i>additional sheets, if</i>	necessary). (L	de specific)			
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DEGA	imendment provides isions for implementi if not applicable, indic	ng the amendm	e, reclassificati ent if not conta	on, or cancellati	on of issued shares, ndment itself:	
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The date of each amendment(s) adoption:	, 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 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 5-9-14	
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)	-
ZAKARYA RABUH	
(Typed or printed name of person signing)	_
PRESIDENT	
(Title of person signing)	_