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## COVER LETTER `

TO: Amendment Section

Division of Corpo	rations				
NAME OF CORPOR	ATION: BOCA	SUNSHINE (	000		
DOCUMENT NUMB	ER:				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	CHRIS	STIAN THEIS			
		Name of Contact Person	)		
	BOCA SUNS	HINE CORP			
•		Firm/ Company			
	9880 GRAN	D VERDE WAY	APT 1608		
		Address			
	BOCA RATION	FLORIDA 33	542 <del>8</del>		
		City/ State and Zip Code			
	<del>P</del> ora armenale	topmout co	$\sim$		
	E-mail address: (to be us	sed for fathere annual report	notification)		
For further information	concerning this matter, pleas	se call:			
CHRISTIA	N THEIS	_at( <b>S6</b> \	1 303 5485		
Name o	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	ing Address		<u>Address</u>		
	ndment Section sion of Corporations	Amendment Section			
	Box 6327	Division of Corporations Clifton Building			
	thassee, FL 32314	2661 Executive Center Circle			
		i aitana	issee, FL 32301		

## Articles of Amendment

to

**Articles of Incorporation** 

FILED

2814 MAR 17 PM 1: 06 SUNSHINE CORP TALLAHASSEE. F (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent CHRISTIAN GRAND YERDE WAY APT 1608 (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. 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.

Example: X Change	<u>PT</u> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	S	CYNTHIA UGAZ	9880 GRAND VERDE WAY
Add			APT 1608
Remove			BOCA RATON FL 33428
2) Change	*****		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	-	· · ·	
Remove			
			·
6) Change			
Add			
Remove			

	nal sheets, if r	ecessary).	(Be specij	îc)			
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an amenun arovisions fo	ar implementi	ng the ame	ndment if	not contained	in the amend	ment itself:	£3 <u>1</u>
(if not a	oplicable, indi	cate N/A)					
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The date of each amendment(s) addate this document was signed.	loption: NICYCVI 15,2014	, if other than the
-	March 13,2014	
Effective date <u>if applicable</u> :	(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 su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved 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)	
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 MC	2rch 13,2014	
Signature	anther .	
(By a di	iregion, 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)	_
	CHRISTIAN THEIS	
	(Typed or printed name of person signing)	_
	PRESIDENT / OWNER	
	(Title of person signing)	-