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And



JUL 25 2014 R. WHITE COVER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Soring, Inc.

DOCUMENT NUMBER: P14000038842

The enclosed Articles of Amendment and fee are submitted for filin

Please return all correspondence concerning this matter to the follow



Re: Soring, Inc. Amendment

)

For further information concerning this matter, please call:

Maura McCarthy Bulman

Name of Contact Person

at (954) 510-2822

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 & 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)

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 Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation 1/k

Soring, Inc.			
(Name of Corporation as currently filed with the	Florida Dept. of State)		
P14000038842			
(Document Number of Corporation	(if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida 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 "corporati "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		
B. Enter new principal office address, if applicable:	7771 W. Oakland Park Blvd.		
(Principal office address MUST BE A STREET ADDRESS)	Suite 221		
	Sunrise, Florida 33351		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7771 W. Oakland Park Blvd.		
	Suite 221		
	Sunrise, Florida 33351		
D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address			
Name of New Registered Agent Maura McCar	thy Bulman, Esq.		
1960-7 N. Coi	mmerce Parkway		
**************************************	treet address)		
New Registered Office Address: Weston	, Florida 33326		
(Cin	(Zip Code)		
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>		
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.		
- AMOUN			
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	PT	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	S	John R. Miller	7771 W. Oakland Park Blv
Add			Suite 221
Remove			Sunrise, FL 33351
2) Change			_
Add			
Remove			44
3) Change			
Add			
Remove			-
4) Change	<u> </u>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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f an amendment provide	ting the amen	inge, reclassific dment if not co	ation, or can ntained in th	cellation of e amendme	issued share nt itself:	<u>:S,</u>
provisions for implement (if not applicable, ind	licate N/A)					
provisions for implement (if not applicable, ind	licate N/A)					
provisions for implement (if not applicable, ind	licate N/A)					
provisions for implement (if not applicable, ind	licate N/A)					
provisions for implement (if not applicable, ind	licate N/A)					
provisions for implement (if not applicable, ind	licate N/A)					
provisions for implement (if not applicable, ind	licate N/A)					

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 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)	
(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 77 2014 / 2010 20 1	
Signature 1/04/04/2	THE SALES LABOUT Lab.
(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	
Harald Beyer	
(Typed or printed name of person signing)	Parada Julia da Mario
President	
(Title of person signing)	