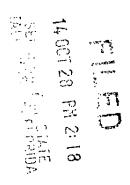
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Certified Copies	Certificates of	of Status
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(RM 11-7-14

COVER LETTER

Division of Corporations CLEAR SUN HOLDINGS, INC NAME OF CORPORATION: P14000084651 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: BARBARA ROBEY CLEAR SUN HOLDINGS, INC. 806 VERONA STREET, SUITE 4

KISSIMMEE, FL 34741 For further information concerning this matter, please call: 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: □ \$35 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)

Mailing Address

TO: Amendment Section

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

Articles of Incorporation

CLEAR SUN HOLDINGS, INC.

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

(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:

3. 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 (Florida street address)	name must be distinguishable and contain the word "corporation," "company," or "incorporated" or th "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name m word "chartered," "professional association," or the abbreviation "P.A."	
(Mailing address MAY BE A POST OFFICE BOX) 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		<u> </u>
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		
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		
Name of New Registered Agent		
Name of New Registered Agent		
(Florida street address)	Name of New Registered Agent	
	(Florida street address)	
New Registered Office Address: , Florida (Zip Code)	New Registered Office Address: , Florida , Florida	

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		-	
	$\underline{\mathbf{V}}$	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	D	CHARLES MEDALIE	806 VERONA ST.
Add Remove			KISSIMMEE, FL 34741
2) Change			
Add			
Remove			
3) Change			SE
Add			
Remove			(2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
4) Change	<u>.</u>		
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5) Change		<u> </u>	
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6) Change			
Add			
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<u>ovisions for implementing the amer</u>	inge, reclassification, or c dment if not contained in	ancellation of issued the amendment itsel	shares, <u>:</u>
n amendment provides for an exchovisions for implementing the amerous (if not applicable, indicate N/A)	inge, reclassification, or c dment if not contained in	ancellation of issued the amendment itsel	shares, <u>:</u>
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The date of each amendment(s) adoption:	10.24.14	, if other than th
date this document was signed. Effective date if applicable:	10.24-14	
	(no more than 90 days after amendment file date)	•
Adoption of Amendment(s) (CH	IECK ONE) ⊋ç	7
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes cast for the amendment(s) approval.	00 mm/s
	e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	
	ndment(s) was/were sufficient for approval	2: 18
by(voi	ting group)	
action was not required.	board of directors without shareholder action and shareholder incorporators without shareholder action and shareholder	
Dated_ 10-24-14	<u> </u>	
selected, by an inco	ident or other officer – if directors or officers have not been orporator – if in the hands of a receiver, trustee, or other court	-
appointed fiduciary		
	(Typed or printed name of person signing)	•
	(Typed or printed name of person signing)	
	V. PRESIDENT.	
	(Title of person signing)	