P14000085445

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COVER LETTER

Division of Corporations
NAME OF CORPORATION: FLGAL DEALT- GROUP, INC.
DOCUMENT NUMBER: P14000085445
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
HUTEL Kirshenberg Name of Contact Person
Elgal Realty Group Inc.
10071 ww 10th Street Address
plantation FL 33322
City/ State and Zip Code
Hkirshehberg Gaol, Low E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
For further information concerning this matter, please call: Harel kirshenberg at (954) 600 1337 55 55 55 55 55 55 55 55 55 55 55 55 55
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy (Additional Copy

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

is enclosed)

Articles of Amendment Articles of Incorporation of

	to Articles of Incorporation of		De Care	SHAN TO
(Name of Corporation as curr	rently filed with the Florida Dept.	of State)		
			······································	TO TO
(Document Nu	mber of Corporation (if known)			ين ياري
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	, Florida Statutes, this <i>Florida Profi</i>	<i>t Corporation</i> adop	ots the following ar	mendment(s) to
A. If amending name, enter the new name of	of the corporation:			
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	"Corp," "Inc," or "Co". A prof		ted" or the abbro	
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE				
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)				
D. If amending the registered agent and/or new registered agent and/or the new reg		a, enter the name	of the	
Hame of New Registered rigem				
	(Florida street address)			
New Registered Office Address:		, Florida		
	(City)		(Zip Code)	
New Registered Agent's Signature, if chang I hereby accept the appointment as registered		nt the obligations o	ftha position	
i nervoy accept the appointment as registered	адет і ат затанає жил апа ассе	pi ine obligations o	у те розшон.	
Signati	ure of New Registered Agent, if chan	ging		

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>	Name	<u>Addres</u> s
1) Change	<u>P</u>	Chelminsky yepus	a 2085 n university
Add		. /	drive sunrise FL
Remove			33322
2) Change	D	Harel Kirshenberg	10071 NW 104 Street
Add			Plantation Fl 33399
Remove			
3) Change		-	
Add			
Remove			
4) Change	 		
Add			<u></u>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

uuun aaannona	l sheets, if necessary).	eles, enter change(s) here: (Be specific)
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an amendmer	t provides for an excha	ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
(if not appl	cable, indicate N/A)	dinent if not contained in the amendment users:
	cubic, muicule 1971)	
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The date of each amendment(s) adoption: 19-30-9014 date this document was signed.	, if other than the
•	
Effective date if applicable: 12-30-2014 (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 12-30-2014	
Dated 12-30-9014 Signature 423 2	
(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)	
HAREL KIRSHEWBERG (Typed or printed name of person signing)	5
(Title of person signing)	
LI HE DI DENDI KIODING!	