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R. WHITE

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: CNK MARKETING INC DOCUMENT NUMBER: P140000 89043 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: NARESH K CHINIALA

Name of Contact Person CNK MARKETING INC Firm/ Company 14350 60 STREET N STE# 30716 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kunar at (904) 868 - 6016

Area Code & Daytime Telephone Number Name of Contact Person 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 (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

FILED

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to

CNK MARKETING IN	·	TATE TO THAT PROJECT.	B,
(Name of Corporation as currently filed wit	h the Florida Dept. of State)	A AECANASSES, FLORIE	Ä
P14000089043		Nig.	
(Document Number of Corpor	ration (if known)		
arsuant to the provisions of section 607.1006, Florida Statut Articles of Incorporation:	es, this <i>Florida Profit Corpora</i>	tion adopts the following amen	ndme
If amending name, enter the new name of the corporat	ion:		
		The	new
ame must be distinguishable and contain the word "cor Corp.," "Inc.," or Co.," or the designation "Corp," "Inc ord "chartered," "professional association," or the abbrev	," or "Co". A professional c	ncorporated" or the abbrevi orporation name must contain	iation in the
Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		•	
mines		<u> </u>	
If amending the registered agent and/or registered offinew registered agent and/or the new registered office a	<u>ce address in Florida, enter tl</u> address:	ne name of the	
Name of New Registered Agent			
name of their neglative rigem			
(Flo	orida street address)		
New Registered Office Address:	F	lorida	
New Register ou Office That ess.	(City)	(Zip Code)	
ew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa		gations of the position.	
Signature of New Regi	istered 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	<u>PT</u>	John Do	<u>oe</u>		
X Remove	<u>V</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sr	nit <u>h</u>		
Type of Action (Check One)	<u>Title</u>		Name	•	Address
Change Add Remove	PI)	NARESH	K CHINTALA	CLEARDATER FL-33760
2) Change Add Remove	. T	_	_MoHD	mußinudat <u>k</u> han	CLEARWATER FL-32760
Change Add Remove	***************************************	_			
4) Change Add Remove		_			
5) Change Add Remove		_			
6) Change Add Remove		-			

	icles, enter change(s) here: (Be specific)	
		 -
		<u></u>
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provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:	
an amendment provides for an exch- provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:	
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:	
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provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:	

The date of each amendment(s) adoption date this document was signed.	ition: Id 2014	, if other than the
J		
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 was/were suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement ch 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 adopte action was not required.	ed by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated121	2014	
	C. Naver	_
selected, t	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
	NARESH K CHIMALA	
	(Typed or printed name of person signing)	
	Р	
 -	(Title of person signing)	