P150000008073

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COVER LETTER

TO: Amendment Sect Division of Corpo						
NAME OF CORPO	RATION: POLSK	i ART & Desi	GN CORP			
NAME OF CORPORATION: POLSKI ART & Design CORP DOCUMENT NUMBER: P15000008073						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all corres	spondence concerning this ma	atter to the following:				
	CARI	Name of Contact Person				
	_	Name of Contact Person	n			
	POLSKI ART L DESIGN CORP Firm/Company 14651 BISCAYNE BLVD SUITE 184 Address WORTH HIATI BEACH-FL 3361/					
		Firm/ Company				
	14651 1315	SCAYNE BLUD	5017e 184			
		Address				
	WORTH HIAM BEACH-FL 33H/					
City/ State and Zip Code						
	E-mail address: (to be u	sed for future annual report	notification)			
For further information	n concerning this matter, plea	se call:				
CARIOS	A MATTS	at (305	303-6637			
Name o	of Contact Person	Area Co	de & 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)	☐S52.50 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

Articles of Incorporation

POLSKI ART & DESIGN (Name of Corporation as currently filed with the Florida Dept. of State) P15000008073 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: none 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: CARLOS A. Del MATTO Name of New Registered Agent 14651 BISCAYNE BLUD SUITE 184 (Florida street address)

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent. Lam familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

NORTH MIAN BEACH, Florida 33181

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.

Mike Jones, V as Remov Example:	ve, and Sa	lly Smith, SV as an Add.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	PD	CRISTIAN E QUIROGA	14651 BISCAYNE BLUD SUITE NORTH MINN! BEAULFL 3318, 184
Add Remove			
2) Change	PD	CARLOS A. HATTO	14651 BISCAYNE BLVD SUITE 184 NORTH MANT BEACH-FL 33181
Add Remove			
3) Change Add			
Remove			
4) Change			
Add Remove		,	
5) Change			
Add Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
none	
	
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. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
none	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 01 /28/15	
Effective date if applicable: 01 28/15 (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 01-28-15	
Signature	··········
(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)	
CARLOS A MATTO	_
(Typed or printed name of person signing)	
President	

(Title of person signing)