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TALLABASSEE, FLORIDA

5/18/15

COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPOR	AATION: <u>CORRY</u>	pro coci	NA TUC. 75/9
DOCUMENT NUME	BER:	5000038	7519
	of Amendment and fee are su		
Please return all corres	pondence concerning this mat	tter to the following:	
	IRA	aresia Fr	TRAARA
		Name of Contact Perso	n
	CURRYER	PRD COCIL	n n 1s Drc.
•		Firm/ Company	
•	3020	LAM BEATON O	Blud-SuitE 108
	,	Address	
	ORLAND	O FL 327 City/ State and Zip Cod	725
		/ City/ State and Zip Cod	e
		A OeRAA an A	
	2 man address (to be as	io ioi iutai annuai report	
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CANOS	Valdernan	1A at (321	
Name o	of Contact Person	Area Co	ode & Daytime Telephone Number
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	ling Address		Address
Amendment Section Division of Corporations			dment Section on of Corporations
Division of Corporations		٠٠٠١٥١٠	v F

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

	Articles of Incorporation	and the second second
,	of	FILED
Cure	YEORD COCKA.	Dec
(Name of Corr	poration as currently filed with the F	orida Dept. Mistata 3 4:
	P150000 385	19 SENSETARY OF STATE
1)	Document Number of Corporation (if ke	nown) TALLAMASSEE, BLURIUM
		D over
tursuant to the provisions of section 607.1006, Fax Articles of Incorporation:	Florida Statutes, this <i>Florida Profit Col</i>	rporation adopts the following amendment(s
a. If amending name, enter the new name of	the corporation:	
	N/A	The new
came must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," or	"Corp," "Inc," or "Co". A professio	
3. Enter new principal office address, if appl Principal office address MUST BE A STREET		
Frincipal Office address MOSI BE A SIREE!	(ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFIC</u>	<u>E BOX</u>)	
	/	
		
 If amending the registered agent and/or re new registered agent and/or the new regis 		ter the name of the
Name of New Registered Agent		_
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
iew Registered Agent's Signature, if changin weby accept the appointment as registered ag		a phlications of the position
но у иссерь те арропатель из гезілегей из	₅ ст 1 ат јаница жин ана ассері інс	consumers of the position.
	Signature of New Registered Agent, ij	f changing
	– Signature oj New Kegisterea Agent, tj	cnanging

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: ≥ 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	<u>Addres</u> s
1 Change	P	FRANCESCO FERRALA	1757 AMARYLLIS CIR
Add			Orlan BO FL 30825
Remove			60875
2)Change	P	HECTOR Niques	2563 River Ridge De ORLANDO PL 32825
Add			ORLANDO PL
Remove			32825
3) Change			
Add			
Remove			
41 Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
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	have a look water and the same
an amendment provides for an exci	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	Adment it not contained in the amendment ison.
,	

The date of each amendment(s) adoption: 5-8-15 date this document was signed.	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date value document's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
I. 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	
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)	~
(Typed or printed name of person signing)	
FRANK FERRARA P (Title of person signing)	
(Title of person signing)	