P15000070179

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COVER LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

NAME OF CORPO	RATION: Sunshine Gifts & 1	Novelties Inc		
DOCUMENT NUMI	D16000070170			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Milad Chater			
		Name of Contact Perso	n	
		Firm/ Company		
	9214 Bay Hill Blvd			
		Address		
	Orlando, FL 32819			
		City/ State and Zip Cod	le	
MCII	NFO1@aol.com			
		sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
Milad Chater		at (876-8383 OR	407-247-7476(ceil)
Name	of Contact Person	Area Co	ode & Daytime Telepho	one Number
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Stat Certified Copy (Additional Copy is enclosed)	us
Ame Divi	iling Address endment Section ision of Corporations . Box 6327	Ameno Divisio	Address Iment Section on of Corporations on Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Sunshine Gifts & Novelties, Inc.		
(Name of Corporation as current	lly filed with the Florida Dept. of State)	
P15000070179		
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new name of the corporation:		
N/A	The new	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	10725 International Drive, Suite 120	
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL 32821	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the name of the s:	
Name of New Registered Agent N/A	<u></u>	
Nume of New Registered Agent		
(Florida st	reet address)	
N/A	:	
New Registered Office Address:	(City), Florida, Florida	
	SE SE	
	7 1	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	with and assent the allientions of the william	
and the second s	with and accept the obligations of the position.	

Signature of New Registered 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.

Example: XChange	<u>PT</u>	<u>John Doe</u>	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name.	<u>Addres</u> s
1) Change		N/A	N/A
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add		-	
Remove			
5) GI			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Article (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
/A	
······································	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
- · · · · · · · · · · · · · · · · · · ·	
	
•	

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		<u></u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	(s)
	pproved by the shareholders through voting groups. The following statem or each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	.11	
	(voting group)	
☐ The amendment(s) was/were a action-was-not required:	dopted by the board of directors without shareholder action and sharehold	ler
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated 02	8-27-2015	
Signature		
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	Milad Chater	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	