P1600016810

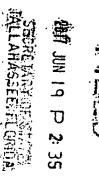
(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: C&E MULTI SER	VICE CORP
DOCUMENT NUMBER: P16000016810	
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this mat	eter to the following:
MIRCEA C RAKOSI	·
	Name of Contact Person
C&E MULTI SERVICE COI	RP
	Firm/ Company
34ંજર્3 ROGERS MILLS RD	
	Address
MT. STERLING, KY 40353	
	City/ State and Zip Code
CRISTIANRAKOSI@GMAIL.CO	M
E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, pleas	e call:
MIRCEA C RAKOSI	at (954) 651-7674 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
\$35 Filing Fee \$\square\$	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □\$52.50 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 to Articles of Incorporation of

C&F	MI	Ħ	TI	SERV	JICE	CORP
	171		11		Y 10-1-	CON

C&E MULTI SERVICE CORP				
(Name of Corporation as curre	ntly filed with the Florida De	pt. of State)		
P16000016810				
(Document Numbe	r of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation	adopts the following	g amendment(s) t	
A. If amending name, enter the new name of the corporation:				
LUCA MULTI CORP			The new	
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." o word "chartered," "professional association," or the abbreviatio	r "Co". A professional corpo			
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3485 ROGERS MILLS F	SRD		
	MT. STERLING, KY 40		353	
D. If amending the registered agent and/or registered office and new registered agent and/or the new registered office address Name of New Registered Agent		nme of the		
(Florida	street address)			
	sireer addressy			
New Registered Office Address:	(City)	, Florida(Zip C	Code)	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia ——————————————————————————————————		SECRETARY OF THE PROPERTY OF T		

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change		:		
Add		 -		
Remove				
Kenkove				
4) Change		_		
Add				
Remove				
5) Change	-	_		
Add				
Remove				
6) Change				
Add				
Remove				

Attach addittor	r adding additional Ar nal sheets, if necessary)	. (Be specific)			
			<u></u>		
		· · · · · · · · · · · · · · · · · · ·			
			•		
			···		•
	<u>.</u>				
an amendme	ent provides for an exc	change, reclassific	cation, or cancellat	ion of issued shares,	
orovisions for if not app	implementing the am plicable, indicate N/A)	endment if not co	ontained in the ame	endment itself:	
				 -	
				-	

The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicable statutory filing requirements, this date rtment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	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 statemen ach voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder	
JUNE 7, 201 Dated Signature ✓	Weter Wood	
(By a dire selected,	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)	
N	IIRCEA C RAKOSI	
_	(Typed or printed name of person signing)	
P	RESIDENT	
_	(Title of person signing)	