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Amend

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Darna cafe of Hall	landale Inc	
DOCUMENT NUMBER: P16000038238		
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
Artur Airapetov		
Darna cafe of Hallandale In	Name of Contact Person	1
19707. Tumberry way, apt.)	Firm/ Company	
Aventura, FL. 33180	Address	
9154249@gmail.com	City/ State and Zip Code	:
E-mail address: (to be)	used for future annual report	
For further information concerning this matter, plea	ase cult:	
Artur Airapetov	at (305	9154249
Name of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for the following amount made	 payable to the Florida Depa 	rtment of State:
■ \$35 Filing Fee	□\$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	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, F1, 32301

	Articles of Amendment to Articles of Incorporation of	
Darna cafe of Hallandale, Inc.		
(Name of Cor	rporation as currently filed with the Florida Dept, of State)	
P16000038238		
	(Document Number of Corporation (if known)	endment(s) to
A. If amending name, enter the new name of	r the corporation:	
name must be distinguishable and contain th "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	he word "corporation," "company," or "incorporated" or the abbrev "Corp," "Inc," or "Co". A professional corporation name must conta	new iation in the
B. Enter new principal office address, if appl Principal office address MUST BE A STREE		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC D. If amending the registered agent and/or renew registered agent and/or the new registered registered agent and/or the new registered.	registered office address in Florida, enter the name of the	FILED -1] AHIO: 38
new registered agent amazor the new regis		
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		
New Registered Office Address.	(City) Florida (Zip Code)	
New Registered Agent's Signature, if changing the language of the appointment as registered a second the appointment as registered as the language of the lang	ing Registered Agent: usent. I am familiar 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.

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, Salty Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Salty Smith, SV as an Add.

Example: X Change	<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)	<u>Title</u>	<u>Nar</u>	 <u>ne</u> i	<u>Addres</u> s
1) Change	VP	Evg	 penii Lvovich il	800. E Hallandale beach Blvd
X Add				suit 9, Hallandale, FL, 33009
Remove				
2) Change				
Add				
Remove				
3) Change				···
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
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6) Change				
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Attach additional sheets, if necessary). (B ę specific)
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If an amondmost associates for an analysis	i l
n an amendment provides for an exchan	ge freelassification, or cancellation of issued shares,
provisions for implementing the amenda	ge reclassification, or cancellation of issued shares, ment if not contained in the amendment itself:
provisions for implementing the amend (if not applicable, indicate N/A)	ment if not contained in the amendment itself:
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The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> :	no more than 90 days after amendment file date)
	meet the applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)
The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app	areholders. The number of votes east for the amendment(s) royal.
	nareholders through voting groups. The following statement oup entitled to vote separately on the amendment(s):
"The number of votes east for the amendr	nent(s) was/were sufficient for approval
by(voting	g group)
☐ The amendment(s) was/were adopted by the box action was not required.	ard of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the inceaction was not required.	corporators without shareholder action and shareholder
08/30/2017 Dated	
Signature (By a director, prostre	no or other officer – if directors or officers have not been
	orator – if in the hands of a receiver, trustee, or other court
ART	UR AIRAPETON
	ped or printed name of person signing) Reciple n t
	(Title of person signing)