Plecoosy

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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ALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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

wining build	OF APORU	2 Inc	
Phocos	4 P1600	y filed with the Florida Dept. of State) D51734 f Corporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	·	•	flowing amendment(s) to
A. If amending name, enter the new nar	ne of the corporation:		
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associati	in the word "corporation "Corp." "Inc," or "	'Co". A professional corporation name	The new the abbreviation must contain the
B. Enter new principal office address, if (Principal office address MUST BE A ST	fapplicable:	PRESIDENTACIONELLA MUNICIPALITA DE 25 AU 2	Zarichia)
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		LYSFI Dr. mc7 (+ 31 32311	creit
D. If amending the registered agent and new registered agent and/or the new			18 FE
Name of New Registered Agent	June .	· 	8-1
New Registered Office Address:	(Florida str	reet address) J. , Florida	7 2: 10 17 0: 10
New Registered Agent's Signature, if ch	anging Registered Agent	(City)	(Li p= ,oae)
I hereby accept the appointment as registe	red agent. I am familiar i	with and accept the obligations of the pos	ition.
	Signature of New I	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: X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		FO (IKUKKS	
Add			
Remove			
2) Change		_	
Add			
Remove			
3) Change			<u> </u>
Add			
Remove			
4) Change			
Adđ			
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)
mount of Amoreci Foc
i-Krina Dresmili Inc

F. 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)

The date of each amendment(s) adoption: date this document was signed.	1-11-14	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendme)	nt file date)
Note: If the date inserted in this block does to document's effective date on the Department of		equirements, this date will not be listed as the
Adoption of Amendment(s) (CI	HECK_ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		for the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting		
"The number of votes cast for the ame	endment(s) was/were sufficient for approv	al
by	oting group)	
The amendment(s) was/were adopted by the action was not required.		ction and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action	and shareholder
Dated - - ©	Cippis	
(By a director, pres selected, by an inc	sident of other officer – if directors or officer porporator – if in the hands of a receiver, to by that fiduciary)	icers have not been rustee, or other court
1-11:	MIN WICE DOKEN	
i) (C	(Typed or printed name of person signing	;)
	(Title of person signing)	