P16000054427

(Re	equestor's Name)	
(Ac	ldress)	
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JUL 1 1 2016 C. CARROTHERS

COVER LETTER



TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: PHONE PEOPLE	INC.	
DOCUMENT NUMBI	ER: P16000054427	<u></u>	
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
Ι	DANIEL RODRIGUEZ		
_		Name of Contact Person	<u> </u>
A	ASSURED FINANCIAL SEI	RVICES, PLLC	
_		Firm/ Company	
8	260 SW 204TH ST		
_		Address	
C	CUTLER BAY, FL 33189		
_		City/ State and Zip Code	
DROD	RIGUEZ@ASSUREDFIRM	LCOM	
	-	ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
DANIEL RODRIGUEZ	Z	at (_) 440-6792
Name of	Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment of State:
S35 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 Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. I	ng Address Idment Section It on of Corporations Box 6327 Thanksee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

•	tly filed with the Florida Dept. of State)	
P16000054427		
(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 an	nendment(s) t
A. If amending name, enter the new name of the corporation:		
CARIBBEAN IMPORTS INC.	Th	e 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	on," "company," or "incorporated" or the abbre "Co". A professional corporation name must cont	eviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		_ -
		<u> </u>
C. Enter new mailing address, if applicable:	ZH (25) Filt Pill Filt Pill	रहाँ।
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	7.2 20	<u> </u>
	<u> </u>	<u> </u>
	17 <u>C.</u>	1
D. If amounting the registered agent and/or registered affice add	dress in Florida, enter the name of the	ö.
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	iress in Florida, enter the hame of the	Ş
Name of New Registered Agent	*fam *	• •
	-	
(Florida st	treet address)	
New Registered Office Address:	treet address) , Florida	

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:	, unu pui	ny oman, or as an Add.	
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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		_	
Add			
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
•			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	•
	<u> </u>
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

06/23/2016
The date of each amendment(s) adoption:, if other than the
date this document was signed.
06/23/2016
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 will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ 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.
6/23/2016 Dated
Signature Dei R
(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)
DANIEL RODRIGUEZ
(Typed or printed name of person signing)
INCORPORATOR
(Title of person signing)