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667 03 WiffEnter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

R.V

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COR AMND/RESTATE/CORRECT OR O/D RESIGN MILMAN INTERNATIONAL CORP

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COVER LETTER

Division of Coη			
NAME OF CORPO	RATION: MILMAN INTE	RNATIONAL CORP	
DOCUMENT NUM	BER: P16000085196	***	
	of Amendment and fee are		
Please return all corre	spondence concerning this m	natter to the following:	
	LAURA PERDOMO		
		Name of Contact Perso	on .
	6187 NW 167 ST STE H20		
		Firm/ Company	
		Address	,,,
	MIAMI. FL 33015		
		City/ State and Zip Coo	le
LENS	UR-ACCOUNTING@LIVE	E.COM	
	-	sed for future annual report	notification)
For Guston information			
Tor turner (morniago)	concerning this matter, plea	SC Call:	
LAURA PERDOMO		305	3648824 de & Daytime Telephone Number
Name o	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status
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	

Ø 003

FILED

17 OCT -2 AM 8: 57

Articles of Amendment to Articles of Incorporation of

В

TATELAHASHIR FORMAN

MILMAN INTERNATIONAL CORP	
(Name of Corporation as current)	ntly filed with the Florida Dept. of State)
	`
•	of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment
If amending name, enter the new name of the corporation:	
une must be dictionnishable and applicable and	The new
one must be distinguishable and contain the word "corporati Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or ord "chartered," "professional association," or the abbreviation	
Enter new principal office address, if applicable:	6187 NW 167 ST
rincipal office address MUST BE A STREET ADDRESS)	STE H20
	MIAMI, FL 33015
Enter new malling address, if applicable: (Mailing address MAY RE A POST OFFICE BOX)	6)87 NW 167 ST
	STE H20
	MIAMI, FL 33015
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
Mar and the second	
	vet address)
New Registered Office Address: 6187 NW 167 ST STE H2	0, MIAMI
	(City) (Zip Code)
v Registered Agent's Signature, if changing Registered Agent;	
reby accept the appointment as registered agent. I om familiar v	with and accept the obligations of the position.
haura din	reth Perdomo
Signature of New R	egistered 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 hold. 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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
l) X Change	P/S	LAURA PERDOMO	NEW ADDRESS
Add			6187 NW 167 ST STE H20
Remove			MIAMI, FL 33015
2) Change			
Add			
Remove			
3) Change	,. , ,		
Add			
Remove			
4) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
5) Change			
Add			
Rumove			
S) Change	<u>.</u>	-	
Add			
Remove			

	ticles, enter change(s) here: (Be specific)	
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an amendment provides for an excha rovisions for implementing the amen (if not applicable, Indicate N/A)	nings, reclassification, or cancellation of issued shares, indicated in the amendment itself:	
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The date of each amendment(s) adoption: 09/30/3>
date this document was signed.
Effective date if applicable: 09 30 13
(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 unendment(s) was/were sufficient for approval
by
(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.
Dated D9 30 13
(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)
(Typed or printed name of person signing)
(Typed or printed name of person signing)
Wasident.
(Title of person signing)