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COVER LETTER

: Amendment Section Division of Corporations Alaro You Inc ME OF CORPORATION: P180000499184 CUMENT NUMBER: _____ enclosed Articles of Amendment and fee are submitted for filing. ase return all correspondence concerning this matter to the following: Ashwin Subbaumi Name of Contact Person Plantation FL 33317

City/ State and Zip Code E-mail address: (to be used for future annual report notification) further information concerning this matter, please call: at (269) 830-3202 Area Code & Davtime Telephone Number losed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐\$43.75 Filing Fee & □S43.75 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, Ft. 32303

Articles of Amendment to Articles of Incorporation of

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70 You, Inc		000	~ ~
(Name of Corporation as currently	v filed with the Florida Dec	- 20124-NOV -8	Du ,
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		TALLAHASSER	
(Document Number of	Corporation (if known)	-CANASSE	E. FLORIDA
suant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Torida Profit Corporation :	idopts the followin	g amendment(s)
f amending name, enter the new name of the corporation:			
			_The new
e must be distinguishable and contain the word "corporation," "co " or Co.," or the designation "Corp," "Inc," or "Co". A artered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated professional corporation i	or the abbreviation must contain	on "Corp "
Enter new principal office address, if applicable: ncipal office address <u>MUST BE A STREET ADDRESS</u>)			
			_ _
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
	- N/A		
f amending the registered agent and/or registered office address:	ess in Florida enter the na	me of the	
Name of New Registered Agent			
		_	
(Florida stree	et address)		
New Registered Office Address:	,	. Florida	
10	Cityy	(Zip C	(ode)
	İ		
Registered Agent's Signature, if changing Registered Agent: eby accept the appointment as registered agent. I am familiar wi	ith and accept the obligation	is of the position	
		Jeruman,	
Signature of New Res	zistered Agent, if changing		
New Registered Office Address: (Constitution of the Registered Agent's Signature, if changing Registered Agent: (Constitution of the Address) (Constitution of the Address) (Constitution of the Address)	ith and accept the obligation	. ,	ode)

ck if applicable

'he amendment(s) is/arc being filed pursuant to s. 607.0120 (11) (e), F.S.

mending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and ress of each Officer and/or Director being added:

ich additional sheets, if necessary)

ise note the officer/director title by the first letter of the office title:

President: V = Vice President: T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief rutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. ident, Treasurer, Director would be PTD.

nges 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 ange, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, e Jones, V as Remove, and Sally Smith, SV as an Add.

mple: Change	<u>PT</u>	John Doe	
Remove	<u>V</u>	Mike Jones	
Add	<u>sv</u>	Sally Smith	
e of Action eck One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change	СМО	Ashwin K Sabbani	8000 West Drive Apt 121
Add			North Bay Village, FL 33141
X Remove			
Change			
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Remove Change			
Add			
Remove			
Change			1
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Remove			
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Change	 ·		-
Add			
Remove			

Attach additional sheets, if necessary). (Be specific) The content of the cont	f amending or adding additional Arti	les, enter change(s) here:	
provisions for implementing the amendment if not contained in the amendment itself:	Attach additional sheets, if necessary),	(Be specific)	
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date of each amendment(s) adoption:	11/6/12=24	if other than the
this document was signed.		
ctive date <u>if applicable</u> :	more than 90 days after amendment file date)	
: If the date inserted in this block does not ment's effective date on the Department of State	eet the applicable statutory filing requirements. e's records.	, this date will not be listed as the
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Signature (By a director, president selected, by an incorpor appointed fiduciary by the selection of the se	or other officer – if directors or officers have no autor – if in the hands of a receiver, trustee, or oth hat fiduciary)	ORIDA
Ashr (Type	ed or printed name of person signing)	
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(Title	of person signing)	