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S. YOUNG

COVER LETTER

TO: Amendment Section

Division of Corporations Savir Molding P18000061748 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Israel Firm/ Company Hollywood, FL 33081
City/State and Zin Code Israel a Savirmou ding. com
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 Fcc **□**\$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** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment

to

Articles of Incorporation

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Savir Molding	Company		
	tion as currently filed with	the Florida Dept. of Sta	<u>(e)</u>
£18,000	061748		
	iment Number of Corporation	ı (if known)	
Pursuant to the provisions of section 607.1006. Florists Articles of Incorporation:	da Statutes, this <i>Florida Proj</i>	fit Corporation adopts the	: following amendment(s) to
A. If amending name, enter the new name of the	corporation:		
Savir Mou	Idina Como	anu	The new
name must be distinguishable and contain the we "Corp.," "Inc.," or Co.," or the designation "Corword "chartered," "professional association," or th	ord "corporation," "comba p," "Inc," or "Co". A pro	ny," or ["incorporated" dessional corporation na	or the abbreviation
B. Enter new principal office address, if applicab (Principal office address MUST BE A STREET AD		AIN	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	<u>ox</u>)	N/A	FILED NB JUL 2B A
D. If amending the registered agent and/or registence new registered agent and/or the new registered		da, enter the name of the	5 cs
Name of New Registered Agent	NIA		
New Registered Office Address:	(Florida street address)	Florid:	4
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	 	ept the obligations of the p	vosition.
	NA		
Sig	nature of New Registered Ag	ent, 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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<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 : Attach <i>additiona</i>	adding additional Art l sheets, if necessary).	licles, enter change (Be specific)	e(s) here:		
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provisions for	mplementing the ame	endment if not con	tained in the ame	ndment itself:	<u>)1</u>
(ij not apju	cable, indicate N/A)				
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	VA	
The date of each amendment(s) adoption date this document was signed.	N/IA	if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file o	date)
Note: If the date inserted in this block dedocument's effective date on the Departme	oes not meet the applicable statutory filing requirer nt of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	y the shareholders. The number of votes east for the for approval.	amendment(s)
	by the shareholders through voting groups. The follooting group entitled to vote separately on the amena	
"The number of votes east for the	amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/were adopted by action was not required.	y the board of directors without shareholder action a	nd shareholder
The amendment(s) was/were adopted by action was not required.	y the incorporators without shareholder action and sl	nareholder
DatedO_¬	117/2018	
Signature	M	<del></del>
selected, by ar	president or other officer – if directors or officers he incorporator – if in the hands of a receiver, trustee, iciary by that fiduciary)	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	