P18000061914

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SEP 25, 2010

COVER LETTER

		<u>COVER LETTER</u>		\$
TO: Amendment Sec Division of Corp				BI SE CONTRACTOR
NAME OF CORPO	RATION: SILUCIAN INC			
	BER: P18000061914			3
	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	JAMES GAGEL			
		Name of Contact Person	1	
	GAGEL LAW FIRM			
		Firm/ Company		
	255 ARAGON AVENUE S	ECOND FLOOR		
		Address		
	CORAL GABLES FL 3313	4		
		City/ State and Zip Cod	e	
ICA	GEL@JGAGEL.COM			
		sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
JAMES GAGEL		at (305	444-7775	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 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)	
	ailing Address		Address	
Amendment Section		Amendment Section Division of Corporations		
Division of Corporations P.O. Box 6327		Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



SILUCIAN INC (Name of Corporation as currently filed with the Florida Dept. of State) P18000061914 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 255 ARAGON AVENUE B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) SECOND FLOOR CORAL GABLES FL 33134 C. Enter new mailing address, if applicable: 255 ARAGON AVENUE (Mailing address MAY BE A POST OFFICE BOX) SECOND FLOOR CORAL GABLES FL 33134 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: JAMES GAGEL Name of New Registered Agent 255 ARAGON AVENUE SECOND FLOOR (Florida street address) CORAL GABLES

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position,

Signature of New Registered Agent, if changing

(City)

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 Doe	
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	D	JUDITH CASTELLANOS	255 ARAGON AVENUE
X Add			SECOND FLOOR
Remove			CORAL GABLES FL 33134
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

Attach a	ding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)	
		- ·
		
·		
If an an	nendment provides for an exchange, reclassification, or cancellation of issued shares,	
<u>provisi</u>	ions for implementing the amendment if not contained in the amendment itself:	
(ij	not applicable, indicate N/A)	
		,,

The date of each amendment(s) a date this document was signed.	adoption:, if	other than the
-		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date will not be be be because of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
hy	(voting group)	
	• • •	
☐ The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated	4/6/13	
Signature	He Costlins	
(By a select	director, president or other officer – if directors or officers have not been ted by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	CESAR CAMARGO	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	