

| (Re | questor's Name) | | | |
|-----------------------------------------|-------------------|-------------|--|--|
| bA) | dress) | | | |
| | dress) | | | |
| (Cit | y/State/Zip/Phone | #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | siness Entity Nam | e) | | |
| (Do | ocument Number) | | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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R. WHITE AUG 27 2018

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2018 AUG 24 PM 1:28
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations SOLARIMON NAME OF CORPORATION: 180 006 2958 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DAVID Shimony

Name of Contact Pers

SOLARINON INC

Firm/ Company Shimony Name of Contact Person 1835 F Hallandale Beach FL 33009

City/ State and Zip Code DAVID @ SOLARIMON. COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DAVID Shimony at (954), 826 - 0809

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee **□\$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

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

is enclosed)



August 14, 2018

DAVID SHIMONY 1835 E HALLANDALE BEACH BLVD #372 HALLANDALE BEACH, FL 33009

SUBJECT: SOLARIMON, INC. Ref. Number: P18000062958

We have received your document for SOLARIMON, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 018A00016785

Rebekah White Regulatory Specialist II

RECEIVETA 18 AUG 24 PH 1449 SECRETARY GF 4773 ALLAHASSETA 34733

FILED

Articles of Amendment to Articles of Incorporation

2018 AUG 24 PM 1: 27

SOLARIMON INC

SECRETARY OF STATE

| filed with the Florida Dept. of State) |
|---------------------------------------------------------------------------------------------------------------|
| 5P |
| Corporation (if known) |
| orida Profit Corporation adopts the following amendment(s) to |
| |
| The new |
| " "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the A." |
| 212 Three delands blid, |
| # 204, Kalloinolale |
| Bch., FL 33009 |
| 1025 E 101120 101 |
| 1835 E Hallandale |
| 10ch. Solvot., 33009 |
| |
| s in Florida, enter the name of the |
| |
| imony |
| llandale Ben. Blook #342 |
| t address) |
| Beach Florida 33009 |
| (Zip Code) |
| |
| |
| |
| th and accept the obligations of the position. |
| |
| |
| gistered 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 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 Do | <u>c</u> | | | | |
|-------------------------------|----------------------------|----------|-------------|--------------|----------------------------------------------------|--|--|
| X Remove | <u>V</u> <u>Mike Jones</u> | | | | | | |
| X Add | <u>sv</u> | Sally Sm | <u>iith</u> | | | | |
| Type of Action (Check One) | <u>Title</u> | | <u>Name</u> | | Address | | |
| 1) Change | CEC | 9 | FLIAHU | ABUKASIS | 840 W 43 Rd Ct | | |
| Add Remove | | | | | 840 W 43 Rd Ct Stiani Beach, FL 33140 | | |
| 2) Change Add | T | _ | ITA Le | eshem | 212 Three Island 4 Blood, # day Hallandale Bar, Fl | | |
| Remove 3) Change | | _ | | | Hellandale Beh. FL 33009 | | |
| Add | | | | | | | |
| 4) Change | | - | | | | | |
| Remove | | | | | | | |
| 5) Change | - | _ | | - | | | |
| Add Remove | | | | | | | |
| 6) Change | | _ | | | | | |
| Add | | | | | | | |
| Remove | | | | | | | |

| | nending or adding additional Articles, enter change(s) here: ch additional sheets, if necessary). (Be specific) |
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| lf aı | amendment provides for an exchange, reclassification, or cancellation of issued shares, |
| pro | visions for implementing the amendment if not contained in the amendment itself: |
| | (if not applicable, indicate N/A) |
| | |
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| The date of each amendment(s) adoption:, if other than the |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| date this document was signed. |
| 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) (<u>CHECK ONE</u>) |
| 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. |
| Dated |
| |
| Signature (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) |
| DAVID Shimony |
| (Typed or printed name of person signing) |
| PRESIDENT |
| (Title of person signing) |