P9600030566

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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FI. 32314

NAME OF CORPORATION: THE CADINE CTOCKED, INC.				
name of corporation: The Capine Citoup, Inc. DOCUMENT NUMBER: P96 DOCC30566				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
JUGA COMP				
Name of Contact Person				
Firm/ Company				
4100 n.35th Ave.				
Address				
HOO N.35th Ave. Address Hollywod, Ft. 33021 Gity/ State and Zip Code				
Gity/ State and Zip Code				
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:				
Name of Contact Person at (954) 274-2316 Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee & S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)				
Mailing Address Street Address				
Amendment Section Amendment Section				
Division of Corporations Division of Corporations				

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment to Articles of Incorporation

Articles of	Incorporation		79
4100	of		*
The Capine	: Grou	p, Inc	7
(Name of Corporation as curre	ently filed with th	e Florida Dept. of State)	
- Pelle	00003	30566	
(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	ais <i>Florida Profit</i>	Corporation adopts the following	amendment(s) to
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	tion," "company, " "Co". A profes n "P.A."	" or "incorporated" or the abb sional corporation name must co.	he new reviation ntain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	-		
 If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre 	dress in Florida, (enter the name of the	
Name of New Registered Agent			
(Florida s	treet address)		
New Registered Office Address:		EL	
	(City)	, Florida(Zip Code	
ew Registered Agent's Signature to 1			
ew Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familiar	t <u>:</u> with and assured	h. LP	
game ou agent. I am jumittar	wun апа ассері іғ	te obligations of the position.	

Signature of New Registered 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:

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

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:		o u. u. m. mat.	
X Change	<u>PT</u> <u>John</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	5	Capine, Karin	4100 n 35th Ave
Add Remove		,	4100 n 35th Ave Hollywood fr 33021
2) Change Add	<u>T</u> _	Capone John	400 N. 354 Ave Hollywood, R. 33021
Remove 3) Change Add	<u> </u>	<u>Nettina</u> Patricia	4100 N 35th Ave Hollywood PC 33021
Remove 4) Change Add Remove	PISIT	Caponer Richard	4100 1 35th Ave Hollywood Fr 33021
5) Change Add Remove			
6) Change Add Remove		-	

	dding additional Art sheets, if necessary).	(Be specific)			
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	rovides for an eyehe	ange reclassification			
an amendment p	lementing the amon	idment if not conta	on, or cancellation ined in the amen	<u>N 61 ISSued Shares</u> dment itself:	ī
	ble, indicate N/A)	_	_		
		-			
				•	
				·	
an amendment p provisions for imp (if not applicat					

The date of each amendment(s) adoption: 5118	_, if other than the
Effective date if applicable: 5/1/8	, in other than the
(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 document's effective date on the Department of State's records.	not be listed as the
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 east for the amendment(s) was/were sufficient for approval	
by	
☐ 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.	
Dated5/1/15	
Signature (By a director, president of 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)	
Süle Director	
(Title of person signing)	