# P97000082726

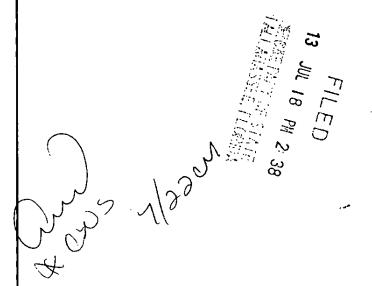
(Requestor's Name)
(Address)
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(Business Entity Name)
(Document Number)
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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	<sub>on:</sub> eFUEL E	FN, CORPORA	TION	
DOCUMENT NUMBER:	P97000	082726		
The enclosed Articles of An	nendment and fee are su	bmitted for filing.		
Please return all correspond	ence concerning this mat	tter to the following:		
	Ljubica	a Stefanovic		
		Name of Contact Person		
	eFUEL EFN	, CORPORATIO	<u>N</u>	
•		Firm/ Company		
	1212 S	. Main Street		
		Address		
	Wildwo	od, FL 34785		
		City/ State and Zip Cod	2	
	efuelef	n@yahoo.com		
		sed for future annual report	notification)	
For further information cond				
Ljubica Ste	efanovic	at \	<u> 504-1300</u>	
Name of Cor	ntact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for 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)	
Mailing Address		Street Address		
	ent Section of Corporations	Amendment Section		
P.O. Box	-	Division of Corporations Clifton Building		
	ee, FL 32314		executive Center Circle	
		Tallahassee, FL 32301		

### **Articles of Amendment** Articles of Incorporation

## eFUEL EFN, CORPORATION

#### (Name of Corporation as currently filed with the Florida Dept. of State)

P97000082726

ent(s) to

A. If amending name, enter the new name of the corporation:		
N/A		The ne
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation	ed" or the abbreviatio
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		
•	<u> </u>	<u>್ಲಿಕ್</u> ಟ್ರಿಪ
C. Enter new mailing address, if applicable:	N/A	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
		m & m
		<u>52 ¥ 0</u>
D. If amending the registered agent and/or registered office add	lress in Florida, enter the name o	of the 22
new registered agent and/or the new registered office address		<u> </u>
Name of New Registered Agent	/A	
	_	
(Florida s	treet address)	
New Registered Office Address:	, Florida	
(City		(Zip Code)

# 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	<del></del>		·	1212 S. Ma	in Street
Add					
Remove					
2) Change		<del></del>			
Add					
Remove				<del></del>	
3) Change	<del> </del>		 ·		
Add					
Remove					
4) Change		<del></del>	 		· · · · ·
Add					
Remove					
5) Change			 <del></del>	<del></del>	
Add					
Remove				-	
6) Change					
		<del>-</del>	 	•	
Add					
Remove					

	N/A
	· · · · · · · · · · · · · · · · · · ·
, <u>, , , , , , , , , , , , , , , , , , </u>	•
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A) ARTICLE FOR CLASSIFI	ICATION AND VERIFICATION OF SHARES
· · · · · · · · · · · · · · · · · · ·	ION confirming structure of Authorized share
	shares 1,000,000,000 (one billion)
	shares 35,000,000 (thirty five million)
	s 1,500,000,000 (one billion five hundred million
	'A", Preferred "B", and Common shares have
	Ti, Troiding D, and Common Shares Have

July 12, 2013 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) 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/vere 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 Avere sufficient for approval ☐ 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. July 12, 2013 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) Ljubica Stefanovic (Typed or printed name of person signing) PRESIDENT/CEO (Title of person signing) MARQUISA PARHAM Nutary Public - State of Florida My Comm. Expires Sep 12, 2014 Commission # EE 25323 Bonded Through National Notary Assn 9112114

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