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TO: Amendment Section Division of Corpor				SEP -3	
NAME OF CORPORA	ation: Zahlene	. Enterprises,	Inc	FH + + 5	
DOCUMENT NUMBI	er: <u>P98000014</u>	093		T STATE	
	f Amendment and fee are su				•
Please return all corresp	ondence concerning this ma	tter to the following:			
-	Beatriz C	Zahlene Name of Contact Person	n		
_	Zahlene,	Enterprises In	<u>د</u>	-	
		Firm/ Company			
	8188 1	NW 181 Street Address			
_	Hiani, F	-L 33018.			
	•	City/ State and Zip Cod	e		
	Beatrize @ E-mail address: (to be us	Zahlena-Com sed for future annual report	notification)		
For further information	concerning this matter, pleas	se cail:			
Beatriz	Zahlene	at (305	_) 549-8685		
	Contact Person	Area Co	de & Daytime Telephone N	umber	
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)		
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 nassee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301		

Articles of Amendment

		Articles of Inco	rporation		SSE W	m
2		of				
Zahlene E	nterprises	Inc.			<u> </u>	-
(Name of Corpora	tion as currently	filed with the Flo	rida Dept. of Sta	<u>te</u>)	- Page 5	n
P9	1800001407	3			.E.	
	ocument Number o		known)			
Pursuant to the provisions of section its Articles of Incorporation:	on 607.1006, Flori	da Statutes, this F	lorida Profit Corp	oration adopts	the following	amendment(s) to
A. If amending name, enter the	new name of the	corporation:				
					7	The new
name must be distinguishable as "Corp.," "Inc.," or Co.," or the word "chartered," "professional o	designation "Cor	rp," "Inc," or "C	o". A profession	· "incorporate al corporation	d" or the abb name must co	reviation ntain the
B. Enter new principal office ad						
(Principal office address <u>MUST I</u>	<u>SE A SIREEI AL</u>	DUKESS)				
C. Enter new mailing address,						
(Mailing address <u>MAY BE A</u>	<u>POST OFFICE B</u>	<u>(OX</u>)				
					· · · · · · · · · · · · · · · · · · ·	
D. If amending the registered as	gent and/or regist	ered office addre	ss in Florida, ente	er the name of	the	
new registered agent and/or						
Name of New Registered	Agent Bear	Kiz c Zav	leas			
	7,18	88 NW 1815 (Florida stree				
		_	i uaaress)	_		
New Registered Office Ad	idress: <u>Wa</u>			_, Florida <u> </u>		
		(City)		(Zip Code)	
New Registered Agent's Signatu	re if chancing D.	ogistared Agents				
I hereby accept the appointment a	s registered agent.	I am familiar wi	th and accept the c	obligations of t	he position.	
	Hall	<i>7.</i>	•	2 ,	•	
	Signature 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 i i i i i 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 to the M 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: PT X Change John Doe X Remove V Mike Jones <u>sv</u> X Add Sally Smith Type of Action Title <u>Addres</u>s Name (Check One) 8788 NW 181 Street. PTCFO Beatriz C. Zahlene Change Miani, FL 33018, Add Remove Lordan H. Zahlene 8 J88 NW 181 Street VZEO Change Mary FL 33018. Add Remove Beatriz C. Zahkre 8788 NW 181 Street. DSTR Change Hiati FL 33018. Add Remove Yoslaydis Rivero 5 6978 W 5th court Change Haleah, FL 33014. Add Remove Change Add Remove Change

Add

Remove

(Attach additional sheets, if necessary). (Be specific)	
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If an amondment awayides for an evaluation are realizable as a second list of	
If an amendment provides for an exchange, reclassification, or cancellation or provisions for implementing the amendment if not contained in the amendment.	f issued shares,
provisions for implementing the amendment if not contained in the amendm	f issued shares, ent itself:
If an amendment provides for an exchange, reclassification, or cancellation o provisions for implementing the amendment if not contained in the amendm (if not applicable, indicate N/A)	f issued shares, ent itself:
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The date of each amendment(s) adoption	on:	, if other	than the
date this document was signed.	•		
Effective date if applicable:	08-26-2014		
Elicente date il applicable.	08-26-2014. (no more than 90 days after amendment file date)	•	
Adoption of Amendment(s)	(CHECK ONE)		
	AL SE	7	
I'he amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes cast for the amendment(s)	3S.	
		. 	Owners
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	ယ်	The same
musi ve separaiejy provided jor each		2	1 1
"The number of votes cast for th	e amendment(s) was/were sufficient for approval	PH i: i	
by	" On	7.5	
	(voting group)		
I'he amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder		
accion was not required.			
	by the incorporators without shareholder action and shareholder		
action was not required.			
Dated	36-2014.		
Dattu			
Signature	de no.		
(By a directo	r-president or other officer – if directors or officers have not been		
	an incorporator - if in the hands of a receiver, trustee, or other court		
appointed fie	duciary by that fiduciary)		
	Beatriz C. Zahlene.		
<u></u>	(Typed or printed name of person signing)		
	(-)!		
<u></u>	PTCFO		
	(Title of person signing)		