P98000014809

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OCT - 8 2012

T. LEWIS

COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION: CELLULAN	ND INC	
DOCUMENT NUMBER: P9800001480	9	
The enclosed Articles of Amendment and fee are su		
Please return all correspondence concerning this ma	atter to the following:	
JACOB KALMOV	VICZ	
	Name of Contact Persor	
J KALMOWICZ A	ACCOUNTING	
	Firm/ Company	
2500 HOLLYWO	OD BLVD STE 4	106
	Address	
HOLLYWOOD, F	L 33020	
	City/ State and Zip Code	
JAKETAX@AOL.CO	M	
	sed for future annual report	notification)
·	•	•
For further information concerning this matter, please	se call:	
JACOB KALMOWICZ	at (954	925-4060
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	rtment 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
Amendment Section	Amend	ment Section
Division of Corporations		n of Corporations
P.O. Box 6327 Tallahassee, FL 32314		Building xecutive Center Circle
rananassee, FL 32314	2001 E	Accurive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

FILED

2012 OCT -4 PH 2: 03

CELLULAND INC.

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

P98000014809

nt(s) to

(Document Number	r of Corporation (if known)	•	
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Florida F	Profit Corporation adop	ts the following amendme
A. If amending name, enter the new name of the	e corporation:		
SUNNY ISLE INTERNATIONA	L REALTY INC		The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	word "corporation," "con orp," "Inc," or "Co". A		ted" or the abbreviation
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)		
D. If amending the registered agent and/or reginew registered agent and/or the new register	stered office address in Fi	orida, enter the name	of the
Name of New Registered Agent			
	(Florida street addres	rs)	
New Registered Office Address:		, Florida	· ·
	(City)	· · ·	(Zip Code)
New Registered Office Address: New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent	(City) Registered Agent: nt. I am familiar with and		

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; 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 <math>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>oe</u>		
X Remove	<u>V</u>	Mike Jo	<u>ones</u>		
X Add	<u>sv</u>	Sally Sn	nith		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change					
Add	•				
Remove					
2) Change	<u> </u>			•	
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change					
Add		_			
Remove					
5) Change					•
5) Change		<u></u>			-
Add					
Remove					
6) Change		_			
Add					
Remove					

	onal sheets, if ne	ecessary).	(Be specific)				

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If an amendr	nent provides f or implementir	for an exch	ange, reclassif	ication, or cal	<u>ncellation of</u> he amendme	ISSUED SNAF	<u>25.</u>
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The date of each amendment(s) adoption: 09/20/2012
Effective date if applicable:	09/20/2012
<u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement 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 action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
_{Dated} 09/2	0/2012
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
·	MOSHE FINKEL
	(Typed or printed name of person signing)
	DIRECTOR
-	(Title of person signing)