## P98000066994

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cid	ty/State/Zip/Phone	÷#)
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T. BROWN

## **COVER LETTER**

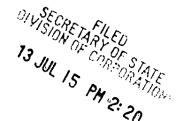
TO: Amendment Section Division of Corporations

į

NAME OF CORPORATION: KOIE'S GR	OUP CORPOR	ATION	
DOCUMENT NUMBER: P98000066994	4		
The enclosed Articles of Amendment and fee are sub	omitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
ISAAC EDUARDO	O SAFDIE		
KOIE'S GROUP (	Name of Contact Person		
	Firm/ Company		
5425 W HALLANDALE BCH BLVD			
	Address		
WEST PARK, FL	33023		
	City/ State and Zip Code		
IHVH1326@AOL.CO	М		
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please	e call:		
ISAAC E SAFDIE	at (786	<u>344-6178</u>	
Name of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made p	ayable to the Florida Depa	ertment of State:	
\$35 Filing Fee Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



## KOIE'S GROUP CORPORATION

ROLE O CINOCI CONTION		50
(Name of Corporation as currently filed with the Florid	a Dept. of State)	
P98000066994		
(Document Number of Corporation (if known	wn)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florid</i> its Articles of Incorporation:	da Profit Corporation adopts the following am	endment(s) to
A. If amending name, enter the new name of the corporation:		
<u></u>	The	e new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", word "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must conte	viation ain the
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		
_		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
<del>-</del> -		
_		
D. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	1 Florida, enter the name of the	
Name of New Registered Agent		
(Florida street ad	dress)	
New Registered Office Address:	Florida	
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with a	and accept the obligations of the position.	
Signature of New Pagistered Joans	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> <u>John</u>	<u>l Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		SAFDIE, AARON J	5425 W HALLANDALE BCH BLVD
Add			WEST PARK,
X Remove			FLORIDA 33023
2) Change	MGR	SAFDIE, ELIZABETH DMRS.	5125 W HALLANDALE BCH BLVD
Add	<u></u>		WEST PARK,
X Remove			FLORIDA 33023
3 ) Change	MGR	SAFDIE, GISELA SMISS	5425 W HALLANDALE BCH BLVD
Add		*	WEST PARK,
Remove			FLORIDA 33023
4) Change			
Add			
Remove			
5) Change	<u></u>		
Add			
Remove			
6) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			

<u>,</u>

ttach additional sheets, if neces	ssary). (Be spec	rific)			
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	<del></del>			<del></del>	
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an amendment provides for	an exchange, rec	lassification, or	cancellation of	issued shares,	
provisions for implementing t (if not applicable, indicate	he amendment if	not contained i	n the amendme	<u>nt itself:</u>	
(ij noi uppneuoie, maietae	74/21 )				
		•			
			•		
		-	<u>.</u>		
		_	•		
					-

The date of each amendment(s) adoption: JULY 1, 2013		
Effective date <u>if_applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	CHECK ONE)	
☐ The amendment(s) was/were adopted by t by the shareholders was/were sufficient for	the shareholders. The number of votes cast for the amendment(s) or approval.	
	the shareholders through voting groups. The following statement ing group entitled to vote separately on the amendment(s):	
"The number of votes east for the ar	mendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.  The amendment(s) was/were adopted by taction was not required.  Dated JULY 1, 20  Signature (By a directol, p selected, by an iappointed fiducing)	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court iary by that fiduciary)  C EDUARDO SAFDIE	
	(Typed or printed name of person signing)	
PRE	SIDENT	
	(Title of person signing)	