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12 AUG 29 AH II: 2

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Amend

AUG 3 1 2012

T. CAULEY

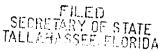
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 6742 Coll	ins Avenue Corp.
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
Jonathan D. Bel	loff, Esq.
	Name of Contact Person
Beloff Parker, P	
	Firm/ Company
1691 Michigan	Avenue, Suite 320
- Too I Who Ingani	Address
M: 15 1 5	
Miami Beach, F	lorida 33139
	City/ State and Zip Code
idh @halaffaarlar a	•••
jdb@beloffparker.co	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	ease call:
Jonathan D. Beloff	_{at (} 305 ₎ 673 - 1101
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	de payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassaa El 22214	2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of



12 AUG 29 AN II: 22

6742 COLLINS AVENUE CORP.

(Name of Corporation as currently fi	iled with the Floric	la Dept. of State)		
P98000089485				
(Document Number of	Corporation (if kno	own)		
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this <i>Flor</i> e	ida Profit Corporation ad	opts the following	; amendment(s) to
A. If amending name, enter the new name of the co	orporation:			
				The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	o," "Inc," or "Co".	. A professional corpora	rated" or the ab ition name must c	breviation ontain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD				
	_			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BC)	<u></u>			
	_			
D. If amending the registered agent and/or registenew registered agent and/or the new registered		in Florida, enter the nan	ne of the	
Name of New Registered Agent				
<u></u>				
	(Florida street a	•		
New Registered Office Address:	(City)	, Florida_	(Zip Code)	
	(0.13)		(24)	
New Registered Agent's Signature, if changing Re			6.1	
I hereby accept the appointment as registered agent.	I am familiar with	ana accept the obligation	s of the position.	
Signature of N	low Pagistared Agar	nt 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	•	n Doe	
-			
X Remove	<u>V</u> <u>Mik</u>	<u>se Jones</u>	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	VP/D	Juliette Klepach	555 NE 185 Street
XX Add			Suite 201
Remove			Miami, Florida 33179
2) Change			
Add			
Remove			
3) Change	_		
Add			
Remove			
4) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Lucil	additional sh	ing additional eets, if necessa	ry). (Be sp	pecific)			
							
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n an a provi	inienament p	rovides for an lementing the	amendment	if not conta	ined in the an	endment its	self:
(,	if not applical	ble, indicate N/	(A)		-		
					•		
				.			
					<u> </u>		
	·						

The date of each amendment(s) adoption:	Hugust 10,2012
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s) (C	CHECK ONE)
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	re shareholders. The number of votes east for the amendment(s) rapproval.
	the shareholders through voting groups. The following statement ng group entitled to vitta separately on the amendment(s):
"The number of votes east for the am	endment(s) was/were sufficient for approval
by	oting group)
לי	oting group)
action was not required.	e board of directors without shareholder action and shareholder
action was not required.	e incorporators without shareholder action and shareholder
Doted August 10, 2	012 /
Dated August 10, 2	mml
(By a director, pro	esident or other officer if directors or officers have not been
	corporator – if in the hands of a receiver, trustee, or other court iry by that fiduciary)
_Be	(Typed or printed name of person signing)
Berna	ard Klepach
	(Title of person signing)