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(((H05000218349 3)))

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To:

Division of Corporations

Fax Number : (850)205-0380

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : I20000000257 Phone : (850)224-8870 Fax Number : (850)224-7047

SEP 13 AN 8: 00

## **BASIC AMENDMENT**

SAMKLE HOLDINGS, INC.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 03      |
| Estimated Charge      | \$35.00 |

Electronic Filing Name.

Corporate Filing

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9/13/2005

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| •   |
|---|
| Articles of Amendment   |
| Articles of Incorporation   |
| SAMKIE HOLDINGS INC.  |
| (Name of corporation so ourrently filed with the Florids Dispe, of State)   |
| P 990000 89713 . (Decument number of corporation (if known)   |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Prefit Corporation adopts the following amendment(s) to its Articles of Incorporation:   |
| NEW CORPORATE NAME (If changing):   |
| Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")  A professional corporation must contain the word "chartesed", "professional association," or the abbreviation "P.A.") |
| MENDIMENTS ADOPTED. (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amonded, added or deleted: (BE SPECIFIC)  |
| Registeres agent needs to   |
| be changed to:  |
| Alex Burkin Esquire   |
| pathman Casis CCP   |
| a SouthBiscoine Boulevard   |
| Suite 2400  |
| mi emi, Fl. 33131   |
| •   |
| (Afrach additional pages if necessary)  |
| fan amendment provides for exchange, reclassification, or cancellation of Issued shares, provisions<br>or implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A                         |
|   |
|   |
| (Constitution)  |

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| The date of each emendment(s) adop   | tion: September 9th, 2005   |
|--|---|
| Effective date if applies ble: (no more  | than 90 days after amendment file date)   |
| Adoption of Amendment(s)   | CHECK ONE   |
| the amendment(s) was/wer<br>the amendment(s) by the str                          | e approved by the shareholders. The number of votes cast for approval.  |
| The amendment(s) was/wer following statement must be separately on the amendment | e approved by the shareholders through voting groups. The apparately provided for each voting group entitled to vote int(s):  |
| "The number of votes of  | nat for the amendment(s) was/were sufficient for approval by  |
|  | (voting group)  |
| The amendment(s) was/wer and shareholder section was                             | e adopted by the board of directors without shareholder action not required.  |
| The amendment(s) was/wer shareholder action was not a                            | e adopted by the incorporators without shareholder action and required.   |
| Signed this 9th day of 66  | elember 2005  |
| Signature  | ml  |
| pelected, by an  | caldent or other officer - if directors or officers have not been<br>incorporator - if in the lands of a receiver, trustee, or other court<br>lary by that fiduciary) |
| . · Ri   | aphael Klein  |
| 1  | (Typed or printed name of pamon signing)  |
| , D:   | irector   |
|  | (Title of person rigning)   |

FILING FEE: \$35

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## CERTIFICATE OF DESIGNATION

## REGISTERED AGENT/REGISTERED OFFICE

| organized under the latthe registered office/re | ws of the state of Florid<br>gistered agent, in the st | ats of Florida.         | statement in designating |
|---|--|-------------------------|--------------------------|
| 1. The name of the cor                          | poration is: <u>597</u>                                | nkle Hou                | ings , Inc.              |
|   |  |                         |                          |
| 2. The name and street                          | t address of the register                              | ed agent and office is: | Alex                     |
| Burkin,   | Esquire.   | - pommer                | lavis UP                 |
| 2 South   | Biscolne   | BOULEVARI               | Lewis UP,                |
| Miami, A.                                       | 33131  |                         |                          |

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.