P15000007741

(Rec	questor's Name)	
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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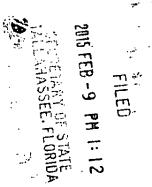
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02/09/15--01004--009 **35.00



11/15

COVER LETTER

TO: "Amendment Section Division of Corporations

NAME OF CORPORATION: OSEAS AS DOCUMENT NUMBER: P1500000774	SEMBLIES INC			
The enclosed Articles of Amendment and fee are sub				
Please return all correspondence concerning this mat	ter to the following:			
EMILIANO MAND	DUJANO			
- 81	Name of Contact Person	1		
OSEAS ASSEMBLIES INC				
	Firm/ Company			
4705 29TH ST S\	•			
	Address			
LEHIGH ACRES	FL 33973			
	City/ State and Zip Code			
miloman1976@gmail	Loom			
	ed for future annual report	notification)		
2 11211 (2001-00). (10 00 10	va for fatoro unitada report			
For further information concerning this matter, pleas	e call:			
EMILIANO MANDUJANO	a _t 239	、333-5907		
Name of Contact Person Area Code & Daytime Telephone 1				
Enclosed is a check for the following amount made p	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	□\$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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

Articles of Amendment Articles of Incorporation

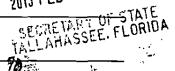
2015 FEB -9 PM 1:12

OSEAS ASSEMBLIES INC

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

P15000007741

(Document Number of Corporation (if known)



ent(s) to

name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t B. Enter new principal office address, if applica	orp," "Inc," or "Co". A	mpany," or "incorporated" or the a professional corporation name must	bbreviation	
R Enter new principal office address if applies			contain the	
D. Enter new principal office audiess, if applica	47	4705 29TH ST SW		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		LEHIGH ACRES FL 33973		
		 	_	
				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i>)		_	
			-	
			_	
 If amending the registered agent and/or registered agent and/or the new register 		iorida, enter the name of the		
Name of New Registered Agent	IANO MANDUJ	ANO		
	29TH ST SW	·····		
	(Florida street addre	,		
New Registered Office Address: LEHI	LEHIGH ACRES Florid		_	
	(City)	Florida 33973 (Zip Code)		

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 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	EMILLIANO MANDUJANO	4705 29TH ST SW
Add			LEHIGH ACRES FL 33973
Remove			
2) Change	P	EMILIANO MANDUJANO	4705 29TH ST SW
Add			LEHIGH ACRES FL 33973
Remove		,	
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pernove			

	onal sheets, if	necessary).	les, enter chang (Be specific)				
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	nent provides	s for an exch	ange, reclassific	ation, or canc	ellation of i	ssued share	<u>es.</u>
an amendn	<u>or implement</u>	ling the amen licate N/A)	iament 11 not co	ntained in the	amenamen	t ttseii:	
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The date of each amendment(s)) adoption: 2/4/15	, if other than the
date this document was signed.		
Effective date if applicable: 2	2/4/15	
	(no more than 90 days after amendment file date)	-
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were aby the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	ast 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 2/4/15	5	
Signature	- Mandejans	<u></u>
(By	a director, president or other officer - if directors or officers have not been	
	cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
арр	Street inductary by that inductary)	
	EMILIANO MANDUJANO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	