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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O.D RESIGN
COMARTI U.S.A. CORP.**

Certificate of Status	0
Certified Copy	0
Page Count	45
Estimated Charge	\$35.00

Handwritten signature and date: 10-5-11

Electronic Filing Menu Corporate Filing Menu Help



October 4, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

COMARTI U.S.A. CORP.
9130 S DADELAND BLVD
SUITE 1600
MIAMI, FL 33156

SUBJECT: COMARTI U.S.A. CORP.
REF: P02000097770

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

FAX Aud. #: H11000:40221
Letter Number: 711L00022809

RECEIVED
11 OCT -4 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

H 11000240221

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: COMARTI U.S.A. CORP.

DOCUMENT NUMBER: P0200009770

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARIO GUZMAN

Name of Contact Person

GUZMAN & GUZMAN, P.A.

Firm/ Company

9130 S. DADELAND BLVD, STE 1000

Address

MIAMI, FL 33156

City/ State and Zip Code

MGUZMAN@GUZMANANDGUZMAN.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIO GUZMAN

Name of Contact Person

at (305)

670-1991
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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

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 32304

H 11000240221

FILED
2011 OCT -4 AM 8:38
SECRETARY OF STATE
TALLAHASSEE-FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

COMARTI U.S.A. CORP

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

P02000097770

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

*(Principal office address **MUST BE A STREET ADDRESS**)*

C. Enter new mailing address, if applicable:

*(Mailing address **MAY BE A POST OFFICE BOX**)*

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street 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 and accept the obligations of the position.

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PD</u>	<u>JULIO COMPARADA</u>	<u>201 ALHAMBRA CIR</u> <u>STE 1102</u> <u>CORAL GABLES, FL 33134</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>VD</u>	<u>EDUARDO MARTINO</u>	<u>201 ALHAMBRA CIR</u> <u>STE 1102</u> <u>CORAL GABLES, FL 33134</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>VSD</u>	<u>JORGE MARTINO</u>	<u>8130 S. DADELAND BLVD</u> <u>SUITE 1600</u> <u>MIAMI, FL 33155</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

ADD

TITLE: PD

NAME : CARLOS ALBERTO SIANO

ADDRESS: 9130 S. DADELAND BLVD, STE 1600 MIAMI, FL 33155

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

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The date of each amendment(s) adoption: September 30, 2011.
(date of adoption is required)

Effective date (if applicable): _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

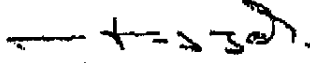
"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____"
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated SEPTEMBER 30, 2011

Signature 

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

MARTINO Joyce.
(Typed or printed name of person signing)

VSD
(Title of person signing)

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