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Special Instruction	s to Filing Officer:
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TO: Amendment Section

Division of Corporations NAME OF CORPORATION: 0600 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JAcqueline Salcines 5.w. 62 ave # 201 MIAMI FL 33143 JSalcines E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □ \$43.75 Filing Fee & ☐\$43.75 Filing Fee & ■ \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 **Clifton Building** 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

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CORP.

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

P06 0000 35372

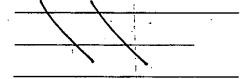
(Document Number of Corporation (if known)

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:

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 <u>MUST BE A STREET ADDRESS</u>)



C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

2/0 JACQUEINE Salcines, ESQ.
7711 S.W. 62 Ave #201

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:

JACQUELINE A. SALCINES, EJQ

7711 S.W. G

W. GZ Ave # JO

New Registered Office Address:

(Florida street address)

S. MIAMI

, Florida 33143

(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 removed and title, name, and address of each Officer (Attach additional sheets, if necessary)		eing
Title - Name	Address Type of	of Action
		move
5 Gonzalo Gardeazabal	1435 Brickell Are to Ac MIAMIR 33/31 - Re	ld move
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E. If amending or adding additional Articles, enter c (attach additional sheets, if necessary). (Be specific		
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F. If an amendment provides for an exchange, recla provisions for implementing the amendment if no		res.
(if not applicable, indicate N/A)		

The date of each amendment	(s) adoption: _	June	1,201	<u> </u>	_ i	
V Effective date <u>if applicable</u> :		JULN 1	option is			
	(no more than !	90 days after d				
	•	, , ,	•		- J	
Adoption of Amendment(s)	(<u>CI</u>	HECK ONE)			. 1	
The amendment(s) was/wer by the shareholders was/we			. The nur	mber of vot	es cast	or the amendmen
The amendment(s) was/wer must be separately provided						
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* by	<u> </u>		. : <u></u>	÷,,, ^		
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action was not required.	e adopted by the	· ·		iout sharen	ioidei ac	tion and sharenor
The amendment(s) was/wer action was not required.	e adopted by the	e incorporators	s without	shareholde	r action	and shareholder
Dated	L/ 5, 2010)	• .		1	
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	Jacqueline (T)	yped or printed	LCNE I name of	ESÓ person sig	ning)	<u>;</u>
	Incorporto (Title o	Ally of person signi	4 /1/1/2 ng) ^	Agent	1/2.	