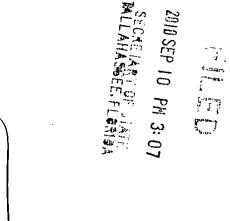
## Ploowolazo6

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	<u> </u>
(Cit	ty/State/Zip/Phone	<del>)</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations	
NAME OF CORPORATION: RETAIL COMPOSER L	Atin Duznica IN
DOCUMENT NUMBER: P 10000012206	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
LUIS SALIWAS  Name of Contact Person	
Retail coupoter Litin Suraica Firm/ Company	12C
3559 NW 87 N. Linu Fl.	33122.
City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:    CARDO JiMPN 22 at (305) 436   Name of Contact Person   Area Code & Daytime To	5 7-676 Telephone Number
Enclosed is a check for the following amount made payable to the Florida Dep	artment of State:
\$35 Filing Fee Certificate of Status  \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment	موقعي وجس
, to	100 S 100
Articles of Incorporation	
of	TOTAL OF THE
"Ketsil Coupular Latin Ausuica	1NC. 1133
(Name of Corporation as currently filed with the Florida Dept. of State)	
P10000012206	
(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:

ame must be distinguishable and contain bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "pro	e designation "Corp," "Inc," or "	Co". A professional corpord
. Enter new principal office address, if ap Principal office address MUST BE A STREE		
rincipul office address <u>most be A street</u>		
	····	
Enter new mailing address, if applicable		
(Mailing address <u>MAY BE A POST OFF</u>	ICE BOX	
If amonding the registered agent and/or	registered office address in Floric	da, enter the name of the
		and cutor the name or the
new registered agent and/or the new reg		au, enter the name of the
new registered agent and/or the new reg		
<u>Name of New Registered Agent:</u>	istered office address:	
<u>Name of New Registered Agent:</u>	(istered office address:  (Florida street address)	) , Florida
<u>Name of New Registered Agent:</u>	(Florida street address)  (City)	, Florida (Zip Code)

## 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) Title -Type of Action Address 3559 NW 82 W. Add E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)

,		•	1	
The date of each amendment	(s) adoption:	te of adoption is re	2010.	
· •	(da	te of adoption is re	quired)	
Effective date <u>if applicable</u> :	(no more than 90 day.	n often amendment	file data)	_
A Comment of the Comm	(no more than 90 day.	s after amenament	me date)	
the fifther with the second				
Adoption of Amendment(s)	(CHECK	ONE)		
The amendment(s) was/we by the shareholders was/we			per of votes east for the amendm	ent(s)
must be separately provide		entitled to vote se	oting groups. The following stoparately on the amendment(s): sient for approval	stement
by	:		,,	
Оу	(voting group)		<b>_'</b>	
action was not required.	·		ut sharcholder action and share	
Dated Signature (By	cted, by an incorporate ointed fiduciars by that	r if in the hands t fiduciary)	lirectors or officers have not be of a receiver, trustee, or other co	
•	<u> </u>	(1 process	SAL PAS .  erson signing)	
•	(Typed or	printed name of p	erson signing)	
addina Salay	<del></del>	sident.		
A series of the	(Title of pers	on signing)		