P11000038324

(Req	uestor's Name)	
(Addı	ess)	
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(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
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SECRETARY OF CORPORATIONS
SIVISION OF CORPORATIONS
11. MAY -4 PM 1: 45

Mame ch 8/cc

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORE	PORATION:	L.P.R. Holding Corpor	ration
DOCUMENT NU	MBER:	P 1100003832	24
The enclosed Artic	les of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
		nrisen R.M. Singh	
	N	ame of Contact Person	
	L.P.R.	Holdings Corporation	
		Firm/ Company	
	664	15 NW 179 Terrace	
	est.	Address	
		Miami, FI 33015 ity/ State and Zip Code	
		•	
<u></u>	E-mail address: (to be use	/s@infionline.net d for future annual report notification	n)
For further informa	ation concerning this matter,	please call:	
Chi	risen R. M. Singh	at (305)	822-3354
Name	of Contact Person	Area Code & Daytime	Telephone Number
Enclosed is a chec	k for the following amount n	nade payable to the Florida De	partment of State:
□ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclose	□ \$52.50 Filing Fee Certificate of Status d) Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

L.P. R. HOLDING CORPORATION		
(Name of Corporation as currently filed with the Florida Dept. of State)		
P 11000038324		
(Document Number of Corporation (if known)		

A. If amending name, enter the new name	of the corporation:			
L. P. R. HO	LDINGS CORPORA	ATION		The new
name must be distinguishable and contai abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," " _I	the designation "Corp,	" "Inc," or "C	o". A professional	
B. Enter new principal office address, if a	pplicable: N	/A		
Principal office address MUST BE A STR				
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF) D. If amending the registered agent and/o new registered agent and/or the new recommendations.	FICE BOX) N/	dress in Florida	a, enter the name of	11 HAY -4 PH 1: 45
	N/A			
Name of New Registered Agent:				
Name of New Registered Agent:	N/A			
Name of New Registered Agent: New Registered Office Address:		street address)		

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>	1	Address	Type of Action
	-	D/K.		
				L Remove
			-	Remove
	<u></u>			 =
E. <u>If am</u> er	nding or adding add	litional Articles, en	ter change(s) here:	
(attach d	additional sheets, if i	necessary). (Be sp	ecific)	
		NK		
				·
			reclassification, or cancel if not contained in the ar	
	not applicable, indic		***************************************	
	···	\	/k	
		<u> </u>		
	-			
		· · · · · · · · · · · · · · · · · · ·		
		****	·	

The date of each amendmen	t(s) adoption: April 27th, 2011
· Effective date <u>if applicable</u> :	April 27th, 2011 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	are adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
··-	ore approved by the shareholders through voting groups. The following statement ed 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)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
Dated_Apr	ii 27th, 2011
Signature_	BH .
(B	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Chrisen R.M.Singh
	(Typed or printed name of person signing)
	President
	(Title of person signing)