P11000103782

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C.LEWIS
AUG 25 2014
EVALUATER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: LATIN AN	IERICA INVE	ST CORP.	
DOCUMENT NUMBE	_{R:} P110001037	782		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ondence concerning this mat	ter to the following:		
ľ	TALO TORRE	SE		
. <u>E</u>	RICKELL PH	<u> </u>		
. 4	44 BRICKELL	Firm/ Company AVE SUITE	P-28	
	/IAMI, FLORII	Address DA 33131		
_		City/ State and Zip Code	÷ ;	
BRI	CKELLDOCU			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information of	concerning this matter, pleas	e call:		
ITALO TORRESE		at (305	,3001811	
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment 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)	
	ng Address		Address	
	Iment Section on of Corporations	Amendment Section; Division of Corporations		
	Sox 6327		Building	
	assee, FL 32314		Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to



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Articles of Incorporation of LATIN AMERICA INVEST CORP

(Name of Corporation as currently filed P11000103782	with the Florida Dept. of State)
(Document Number of Co	poration (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	ration:
N/A	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abo	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
	·.
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 off	ce address:
Name of New Registered Agent N/A	
	(Florida street address)
New Registered Office Address: N/A	, Florida
	(City) (Zip Code)
	,
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	red Agent: n 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)

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	PT	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	JUAN CARLOS AUGIER	SẠN MARTIN 623 8PISO, (
Add			SAN MIGUEL DE TUCUMA
Remove			ARGENTINA CP4000
2) Change	D	NABILA M. DABDOUB	444 BRICKELL AVE.
Add			SÜITE 940
Remove			MIAMI, FLORIDA 33131
3) Change			
Add			
Remove			
4) Change			3
Add			· .
Remove			?
5) Change			
Add			!
Remove			
6) Change			
Add			
Remove			

TI TROUBLE GREET AND	icles, enter change(s) here (Be specific)	<u>i</u> .	
N/A	(De specific)		
VA			
	7.77.017.0	****	

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. If an amendment provides for an exch	nange, reclassification, or	cancellation of issued shares,	
If an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or ndment if not contained in	cancellation of issued shares, note amendment itself:	
provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or ndment if not contained in	cancellation of issued shares, n the amendment itself:	
provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or ndment if not contained i	cancellation of issued shares, n the amendment itself;	
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provisions for implementing the ame	nange, reclassification, or ndment if not contained in	cancellation of issued shares, n the amendment itself:	

The date of each amendment(s) adoption: 8/13/2014 if other than the date this document was signed. 14 AUG 18 PM 1: 37 8/13/2014 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 (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 8/13/2014 Signature (By a director, bresider or other officer - if directors or officers have not been selected, by an meorporator - Win the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) GAIMA P. DIRECTOR

(Title of person signing)