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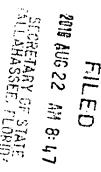
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TO: Amendment Section

Division of Corporations					
NAME OF CORPO	RATION: Krest Investments,	Inc.			
DOCUMENT NUM	D16000060270				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this mat	tter to the following:			
	Antonio R Lopez				
		Name of Contact Perso	n		
1	Antonio R Lopez, CPA				
•		Firm/ Company			
	782 NW Le Jeune Rd, Suite	136			
		Address			
	Miami, FL 33126				
		City/ State and Zip Cod	le		
cpali	120@att.net				
	=	ed for future annual report	notification)		
	uumtuu (10 00 uu	ou ioi iuiuio umaan topoi.	,		
For further information	n concerning this matter, pleas	e call:			
Antonio R Lopez		at (<u>305</u>	448-3323		
Name	of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check fo	r the 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)		
† Mai	ling Address	Street	Addrace		
Mailing Address Amendment Section		Street Address Amendment Section			
	sion of Corporations	Division of Corporations			
	Box 6327	Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301			

Articles of Amendment to Articles of Incorporation of

Krest Investments, Inc.			
(Name of Corporation as c	currently filed with the Flo	rida Dept. of State)	
P16000060270			
(Document No	umber of Corporation (if known	own)	
ursuant to the provisions of section 607,1006, Florida Statut s Articles of Incorporation:	tes, this <i>Florida Profit Corp</i>	poration adopts the follow	ving amendment(
. If amending name, enter the new name of the corporat	tion:		
			The new
ame must be distinguishable and contain the word "cor Corp.," "Inc.," or Co.," or the designation "Corp," "Inc ord "chartered," "professional association," or the abbrev	c," or "Co". A profession		abbreviation
Enter new principal office address, if applicable:			<u></u>
Principal office address <u>MUST BE A STREET ADDRESS</u>	()		
		A:	
: •	-	<u> </u>	20 −
Enter new mailing address, if applicable:		, in the second	
(Mailing address MAY BE A POST OFFICE BOX)	-	<u></u>	3 0
		Q.2.	, T.,
	<u> </u>		
·			
. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a		er the name of the	
Name of New Registered Agent		····	_
, (Fle	orida street address)		,
New Registered Office Address:		, Florida	
7	(City)	(Zi	ip Code)
•			
ew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	Agent:	obligations of the position	•
ыны иссері іне арронитені аз гедізіегей адені. Тат за	anavar wun ana accept the t	ongunons of the position	<i>i.</i>
į !			
Signature	f New Registered Agent, if c	hanaina	

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	<u>PT</u>	John Doe	
X Remove	. <u>V</u>	Mike Jones	
X Add	: <u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u> '	<u>Addres</u> s
1) Change	V	· Vivian Lastre	3801 Anderson Rd
x Add		•	Coral Gables, FL 33134
Remove			
2) Change			
Add			
Remove	4		
3) Change			
Add			
Remove			
. Change I	V ₁		
;			
Add			
Remove			
5) Change		<u> </u>	
Add	i		
6) Change	 		
Add	i		
Remove '	!		

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The date of each amendment(s date this document was signed.	s) adoption:	_, if other than the
_		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	,	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
08/18/10 Dated	6	
_	7//	
Signature	The said	_
selec	a director, president or other officer — if directors or officers have not been cted, by an incorporator — if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Hector Lastre .	
	(Typed or printed name of person signing)	**************************************
1	President	_
1	(Title of person signing)	

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