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| PICK-UP | WAIT | MAIL |
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COVER LETTER

| TO: Amendment Section Division of Corporations |
|---|
| SUBJECT: Finse Investments Cop Name of Corporation |
| DOCUMENT NUMBER: P17000047925 |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Leslic Alboleda Name of Contact Person |
| 7572 Wils 12d B206 |
| Address City/State and Zip Code City/State and Zip Code |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: LISUR ASSULTATION at (25) 0-8473 Name of Contact Person at (25) Area Code & Daytime Telephone Number |
| Enclosed is a \$35.00 check made payable to the Department of State. |

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 7, 2017

LESLIE ABOLEDA 7522 WILES RD B206 CORAL SPRINGS, FL 33067

SUBJECT: FINSE INVESTMENTS CORP

Ref. Number: P17000047925

We have received your document for FINSE INVESTMENTS CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you have submitted does not meet the filing requirements of this office and is incomplete. Please see the enclosed information.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 417A00013780

ATX1

COVER LETTER

| TO: Amendment Section Division of Corporations | | | |
|---|--|---|--|
| NAME OF CORPORATION: FINSE INVESTMENTS CO | RP | | |
| DOCUMENT NUMBER: P17000047925 | | | |
| The enclosed Articles of Amendment and fee are submitted | ed far filing. | | |
| Please return all correspondence concerning this matter to to | he following: | | |
| : LEŞLIE ARBÖLEDA | · | : : | |
| | me of Contact Person | | |
| UNICO FINANCIAL SERVICES | | : | |
| | Firm/ Company | · | |
| 7522 WILES ROAD B206 | | | |
| | Address | | |
| CORAL SPRINGS, FL 33067 | ul State and Zin Codo | | |
| City | y/ State and Zip Code | | |
| UNICOFINANCIAL@HOTMAIL.COM | | | |
| E-meil address: (to be | used for future annual report noti | nçadon) | |
| For further information concerning this matter, please call: | | | |
| LESLIE ARBOLEDA | at (954) 720-8473 | | |
| Name of Contact Person | Area Code & Day | /time Telephone Number | |
| Enclosed is a check for the following amount made payable | to the Florida Department of Stat | : | |
| X \$35 Filing Fee & Certificate of Status | \$43.75 Filling Fee & Certified Copy (Additional copy is enclosed) | \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| Mailing Address | Street Add | _ | |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED

ATX1

Articles of Amendment 17 OCT -6 AM 10: 06 Articles of Incorporation SECRETARY OF STATES OF THE CAHASSEE FEBRUARY

| FINSE INVESTMENTS CORP | |
|--|--|
| (Name of Corporation as currently filed wit | ith the Florida Dept. of State) |
| P17000047925 | |
| (Document Number of Corpora | ation (if known)) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this F. amendment(s) to its Articles of Incorporation: | Florida Profit Corporation adopts the following |
| A. If amending name, enter the new name of the corporation: | |
| | The new |
| name must be distinguishable and contain the word "corporation," "con "Corp ," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A pro- word "chartered." "professional association," or the abbreviation "P.A." | ompany," or "incorporated" or the abbreviation rofessional corporation name must contain the |
| 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 <u>MAY BE A POST OFFICE BOX</u>) | · |
| | |
| • | |
| If amending the registered agent and/or registered office addressinew registered agent and/or the new registered office address | ress in Florida, enter the name of the s: |
| Name of New Registered Agent: | |
| THE TO STORY TROUBLE TO A POST TO | |
| (Florida | de street address) |
| Now Degistered Office Address. | Florida |
| New Registered Office Address: (Ci | , Florida(Zip Code) |
| | |
| | |
| New Registered Agent's Signature, if changing Registered Agent: | |
| I hereby accept the appointment as registered agent. I am familiar with | h and accept the obligations of the position. |
| | |
| Signature of New Registered | d Agent, if changing |

FINSE INVESTMENTS CORP

ATX1

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 | | | | |
|------------------|---------------|--------------|-----------------|----------------------|
| <u>_X</u> | Change | EI | John Doe | |
| <u> X</u> | Remove | <u>V</u> | Mike Jones | |
| <u>x</u> | Add | <u>sv</u> | Sally Smith | |
| Type of (Check (| | <u>Titte</u> | <u>Name</u> | Address |
| 1) | Change | sv | RENZO BASSANINI | 7646 TRETON DRIVE |
| _X_ | Add | | | LAKE WORTH, FL 33467 |
| | Remove | | | |
| 2) | Change | | | |
| | Add | | | |
| | Remove | | | |
| 2) | Change | | | |
| ٥) | Change | | | |
| | Add Remove | | | |
| | Remove | | | |
| 4) | Change | | | |
| | Add | | | |
| | Remove | | | |
| | | | | |
| 5) | Change | | | |
| | Add | | | |
| | Remove | | | |
| 6) | Change | | | |
| | Add | | | |
| | Remove | | | |

| FINSE INVESTMENTS CORP | ATX ² |
|--|------------------|
| E. <u>If amending or adding additional Articles, enter change(s) here</u> : | |
| (Attach additional sheets, if necessary). (Be specific) | |
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| 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) | |
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| | FINSE INVESTMENTS CORP date of each amendment(s) adoption: | 6/27/17· |
|-------|--|--|
| other | than the date this document was signed. | |
| Effec | ctive date if applicable: | 6/7/17 |
| | | (no more than 90 days after amendment file date) |
| | : If the date inserted in this block does not re e document's effective date on the Departm | neet the applicable statutory filing requirements, this date will not be listed ent of State's records. |
| Ado | otion of Amendment(s) | (CHECK ONE) |
| W | The amendment(s) was/were adopted by by the shareholders was/were sufficient for | the shareholders. The number of votes cast for the amendment(s) or approval. |
| | | y the shareholders through voting groups. The following statement ng group entitled to vote separately on the amendment(s): |
| | "The number of votes cast for the a | mendment(s) was/were sufficient for approval |
| | by | |
| | · | (voting group) |
| | The amendment(s) was/were adopted by action was not required. | the board of directors without shareholder action and shareholder |
| | The amendment(s) was/were adopted by | the incorporators without shareholder action and shareholder |
| | action was not required. | /11/1 |
| | Dated / | 5/30/2017 |
| | Signature, C | - This |
| | | or, president or other officer – if directors or officers have not been |
| | | an incorporator – if in the hands of a receiver, trustee, or other court ductary by that fiduciary) |
| | 3-F 3/1100 to | · · · · · · · · · · · · · · · · · · · |
| | CARLOS | S SANCHEZ MALDONADO |
| | | (Typed or printed name of person signing) |
| | PRESID | |
| | | (Title of person signing) |