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SECRETARY OF STATE

APPROVED AND FILED



SOFIA POWELL-COSIO, P.A. 1900 SOUTH WEST 3RD AVENUE MIAMI, FLORIDA 33129 Telephone (305)-579-9988 Facsimile (305) 579-9989

February 3, 2010

Department of State Division of Corporations Corporate Filings P.O.Box 6327 Tallahassee, FL 32314

Re:

Alvi, Inc.

Document No. 630689 FEI Number: 65003645

State: FL Status: Active

Gentlemen:

Enclosed herewith please find the following duly executed forms amending the above captioned corporation. Also enclosed please find our check in the amount of \$122.50:

- 1) Officer/Director Resignation (Fee \$35.00)
- 2) Statement of change of Registered Office or Registered Agent (Fee\$35.00)
- 3) Articles of Amendment to Articles of Incorporation (Fee \$52.50 for Certified additional copy enclosed)

If any further information is required, please do not hesitate to contact our office.

Your help in expediting this matter will be greatly appreciated.

Sincerely,

So*th*a Powell-Cosic

SPC: ms Enclosures

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	Alvi, Inc.	
DOCUMENT NUM	BER:	630689	
The enclosed Articles	of Amendment and fee a	re submitted for filing.	
Please return all corre	spondence concerning thi	s matter to the following:	
		a Powell-Cosio Esq	
	N	ame of Contact Person	
	Sof	ia Powell-Cosio PA	
		Firm/ Company	
	190	00 SW 3rd Avenue	
		Address	
_		Miami, FL 33129	<u></u>
		ity/ State and Zip Code	
	SOfia E-mail address: (to be use	apc@aol.com d for future annual report notification)	
For further information	on concerning this matter,	please call:	
Sofia	Powell-Cosio	at (305)5	79 9988
Name of	Contact Person	Area Code & Daytime Te	lephone Number
Enclosed is a check f	or the following amount m	nade payable to the Florida Depar	tment 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)
Mailing Address Amendment Section		Street Address Amendment Section	

#

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

Articles of Amendment to · **Articles of Incorporation**

Articles of A	mendment
to	
Articles of Inc	corporation The corporation to t
of	To FiNOY
Alvi, Inc.	Se February Co
(Name of Corporation as currently filed with	the Florida Dept. of State)
630689	the Florida Dept. of State) ACCOUNTY OF STATE ACC
(Document Number of Corporation	tion (if known)
Pursuant to the provisions of section 607.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	on:
N/C	The new
name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associant the word "corp.," or the designation "Coname must contain the word "corp.," or the designation "Coname must contain the word "corp.," or the designation "Coname must contain the word "chartered," "professional associant the word "chartered," "professional	Corp," "Inc," or "Co". A professional corporation
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1900 SW 3rd. Avenue Miami, FL 33129
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent: Sofia Powell	-Cosio
New Registered Office Address: 1900 SW 3rd (Flor	d Avenue ida street address)
Miami	, Florida 33129
(City)	
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam.	iliar 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) <u>Title</u> Name <u>Address</u> **Type of Action** DPS Paul D. Barns Jr. 550 Crandon Blvd. ☐ Add Apt 8-E ☑ Remove Key Biscayne, FL 33149 Pedro Alvarez DPS Miami, FL 33129 ☐ Remove ______ 🔲 Add E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) N/C 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) N/C

The date of each amendment	t(s) adoption: January 26, 2010
Effective date if applicable:	January 26, 2919
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	are adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re 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)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
action was not required.	re adopted by the incorporators without shareholder action and shareholder uary 26, 20104
Signature	
(By sele app	a director operation 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 officed fiduciary by that fiduciary)
	Pedro Alvarez
	(Typed or printed name of person signing)
	Director/President/Secretary
	(Title of person signing)