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SECRETARY OF STATE
TALLAHASSEF, FIGURE

Amend

MAY 1 7 2012 T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | CARBALU | G,CORP. | | |
|--|---|--|--|--|
| DOCUMENT NUMB | P080009349 | 1 | | |
| | of Amendment and fee are su | | | |
| Please return all corres | pondence concerning this ma | tter to the following: | | |
| | EDUARDO OTTO | DLINO | | |
| - | CARBALUG, CO | Name of Contact Person | 1 | |
| | 5300 NW 77TH (| Firm/ Company | | |
| • | MIAMIEL 224CC | Address | | |
| - | MIAMI FL 33166 | City/ State and Zip Code | e | |
| EO | TTOLINO@GMA | | | |
| For further information | concerning this matter, pleas | • | | |
| EDUARDO C | TTOLINO | at (305 | 9702959 | |
| Name o | of Contact Person | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | urtment 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 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 | | |

Articles of Amendment Articles of Incorporation of

FILED 2012 MAY 10 PM 1:56 SECRETARY OF STATE TALLAHASSEE, FLORIDA

CARBALUG, CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P08000093491

| (Document | Number | of Corr | oration | (if known | ١ |
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| Document | INDITION | OI COIL | oranon | un Kiiowii | , |

dment(s) to

| . If amending name, enter the new name of the corporation: | (Document Number | er of Corporation (if ki | nown) | |
|--|---|---------------------------------|---------------------------------------|-----------------------------|
| The mane must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevial Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain ord "chartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS.) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) | Pursuant to the provisions of section 607.1006, Floats Articles of Incorporation: | orida Statutes, this <i>Fla</i> | rida Profit Corporation a | adopts the following amenda |
| ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation, "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain ord "chartered." "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS.) Enter new mailing address MUST BE A STREET ADDRESS. Enter new mailing address if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) | . If amending name, enter the new name of th | e corporation: | | |
| ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation, "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain ord "chartered." "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS.) Enter new mailing address MUST BE A STREET ADDRESS. Enter new mailing address if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) | | | | The n |
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| (Mailing address MAY BE A POST OFFICE BOX) 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 office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) ew Registered Agent's Signature, if changing Registered Agent: | | | · · · · · · · · · · · · · · · · · · · | |
| (Mailing address MAY BE A POST OFFICE BOX) 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 office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) ew Registered Agent's Signature, if changing Registered Agent: | | | | |
| . 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 office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) ew Registered Agent's Signature, if changing Registered Agent: | | , now | | |
| Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) we Registered Agent's Signature, if changing Registered Agent: | (Mailing address <u>MAY BE A POST OFFICE</u> | <u>BUX</u>) | | |
| Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) ew Registered Agent's Signature, if changing Registered Agent: | | | | |
| Name of New Registered Agent (Florida street address) New Registered Office Address: | | | s in Florida, enter the na | me of the |
| (Florida street address) New Registered Office Address: | new registered agent and/or the new registe | red office address: | | |
| New Registered Office Address:, Florida | Name of New Registered Agent | | | _ |
| (City) (Zip Code) ew Registered Agent's Signature, if changing Registered Agent: | | (Florida street | address) | _ |
| (City) (Zip Code) ew Registered Agent's Signature, if changing Registered Agent: | New Registered Office Address: | | , Florida | a |
| | | (City) | | (Zip Code) |
| | aw Dagistarad Agant's Signatura if changing | Registered Agents | | |
| nervely decept the appearance as registered agent. I am jamina that are epi the designations of the positions | | | h and accept the obligation | ns 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 | <u>PT</u> Je | ohn Doe | |
|-------------------------------|--------------------|------------------------|---|
| X Remove | <u>V</u> <u>N</u> | <u> 1ike Jones</u> | |
| X Add | <u>sv</u> <u>s</u> | ally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add Remove | D | ANDRES ROMAN ESPINOZA | 5300 NW 77 COURT, SUITE 101 MIAMI FL 33166 |
| 2) Change Add Remove | D | ASDRUBAL E. COLMENARES | 5300 NW 77 COURT, SUITE 101 MIAMI FL 33166 |
| 3) Change Add Remove | | | |
| 4) Change Add Remove | | | |
| 5) Change Add Remove | | | |
| 6) Change Add Remove | | | |

| | icles, enter change(s (Be specific) | | | |
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| If an amendment provides for an exch | | | | |
| or implementing the ame (if not applicable, indicate N/A) | | | | |
| provisions for implementing the ame (if not applicable, indicate N/A) RTICLE IV | SHARES: | | | |
| provisions for implementing the ame (if not applicable, indicate N/A) RTICLE IV ECLASSIFICATION OF | | | | |
| provisions for implementing the ame (if not applicable, indicate N/A) RTICLE IV ECLASSIFICATION OF NDRES ROMAN ESPIN | NOZA 19% | | | |
| provisions for implementing the ame | NOZA 19% | | | |

| he date of each amendment(s) adoption: 4/20/12 | |
|--|----|
| ffective date if applicable: 4/20/12 | |
| (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. | ı |
| 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): | ıt |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by" (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 4/20/12 | |
| Signature | |
| (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court | |
| appointed fiduciary by that fiduciary) | |
| EDUARDO OTTOLINO | |
| (Typed or printed name of person signing) | |
| DIRECTOR | |
| (Title of person signing) | |