G39894

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08/16/04--01010--006 **78.75

FILED

M. ANG 16 AM 9: 40

ECRETARY OF STATE

Amend

T BROWN AUG 2 0 2004

LAW OFFICES OF MICHAEL J. BROOKS, MICHAEL A. FRANK & RODOLFO H. DE LA GUARDIA JR.

ATTORNEYS AT LAW

Main Office / Mailing Address
Suite 620, Union Planters Bank Building
10 Northwest LeJeune Road, Miami, FL 33126-5431

Telephone (305) 443-4217 Facsimile (305) 443-3219

August 12, 2004

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

RE: Reines Corporation

Dear Sir or Madam:

Enclosed are Articles of Amendment, Statement of Change of Registered Office/Agent, cover letters and this firm's check in the amount of \$78.75 representing payment of the filing fees.

Should you have any questions, please do not hesitate to contact me.

Very truly yours,

Michael J. Brooks

MJB/jmb Enc.

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: RETNES	CORPORATION
DOCUMENT NUMBER: 639894	
The enclosed Articles of Amendment and fee are submitted	ed for filing.
Please return all correspondence concerning this matter to	o the following:
Mercy 5 Brooks (Name of Contact F	Person)
(Firm/ Compar	ny)
3191 Coral Wa	105 HF B
Miani Fo (City/ State/ and Zij	33145 p Code)
For further information concerning this matter, please ca	11:
Mercy Stroots at ((Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status C	3.75 Filing Fee & S52.50 Filing Fee ertified Copy Additional copy is Certified Copy enclosed) (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 409 E. Gaines Street Tallahassee, FL 32399

Articles of Amendment to Articles of Incorporation FILED

04 AUG 16 AM 9: 40

TALLAHASSEY OF STATE

Articles of Incorporation of REINES CORPORATION. FLORIDA

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

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

(Document number of corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

//#

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

All

(Attach additional pages if necessary)

If an amendment provides for 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)

New officers + directors:

Antonia R Saladrigas PD

Periol Estrella his resigned as officer + director

(continued)

The date of each amendment(s) adoption: 7/29/04
Effective date if applicable: 7/29/04 (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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 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.
Signed this
appointed fiduciary by that fiduciary)
Antonio Saladrigas (Typed or printed name of person signing)
(Typed or printed name of person signing)
Mile of person signing)
(Title of person signing)

FILING FEE: \$35