G164653

(Re	equestor's Name)	
(Address)		
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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Amend

1Brown 10-24-11

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	Arras Corporation		
DOCUMENT N	UMBER:	G64653		
The enclosed Arti	cles of Amendment and fee	are submitted for filing.		
Please return all c	orrespondence concerning th	is matter to the following:		
Raul Guerra				
	ŗ	Name of Contact Person		
Arras Corporation				
		Firm/ Company		
	291 West 27th Street			
Address				
	Hialeah, Fl. 33010			
	City/ State and Zip Code			
	raul(E-mail address: (to be use	@arrasac.com d for future annual report notification)		
For further inform	ation concerning this matter,	please call:		
	Raul Guerra	at (305)7	96.5337	
Name	of Contact Person	Area Code & Daytime Tel	ephone Number	
Enclosed is a check	k for the following amount n	nade payable to the Florida Depar	tment of State:	
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
P.O. Box 6	tt Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	e	

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

to Articles of Inc. Articles of Inc.	ornoration • F// F.
of	10/10c1 2 ()
Arras Corp	the Florida Dept. of State) AM Dr. 04 the Florida Dept. of State)
(Name of Corporation as currently filed with	the Florida Dept. of State)
G64653	EFORTE
(Document Number of Corporat	ion (if known)
Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>n:</u>
	The new
abbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associated." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add Name of New Registered Agent:	
	da street address)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

(City)

Signature of New Registered Agent, if changing

, Florida_

(Zip Code)

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>	<u>Name</u>	Address	Type of Action
Sec	Tomas Gonzalez	5593 N W 201 Street M iami Gar d ens, Fl, 33055	
(attach ad	ing or adding additional Articles. ditional sheets, if necessary). (Bo	e specific)	
provision		ge, reclassification, or cancellation of i ent if not contained in the amendmen	
			1-
	11 12 11 11 11 11 11 11 11 11 11 11 11 1		

.The date of each amendmen	$t(s)$ adoption: $\underline{1}$	001401
Effective date if applicable:	10014011	(date of adoption is required)
	(no more than	90 days after amendment file date)
Adoption of Amendment(s)	Œ	HECK ONE)
The amendment(s) was/we by the shareholders was/w		ne shareholders. The number of votes cast for the amendment(s) rapproval.
		the shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the ame	endment(s) was/were sufficient for approval
by	(voting group)	.,,
	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by th	ne board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by th	e incorporators without shareholder action and shareholder
Dated_1011	401	
Signature		
(By	a director, presi	ident or other officer - if directors or officers have not been
		rporator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		Raul Guerra
	(T <u>y</u>	yped or printed name of person signing)
		L∕ice €resident
	(Title (of person signing)