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Ta:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : NEIMAN & INTERIAN, PLLC

Account Number : I20180000010

Phone : (305)530-9400 Fax Number : (305)530-9409

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

mbanasco@niflalaw.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN HAIKO, INC.

Certificate of Status	1
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To: 8506176380

From: 3055309409

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COVER LETTER

TO: Amendment Section Division of Corporation	• •					
NAME OF CORPORATIO	N: HAIKO, INC.					
DOCUMENT NUMBER: _	K51902					
The enclosed Articles of Ame	endment and fee are s	abmitted for filing.				
Please return all corresponder	nce concerning this ma	atter to the following:				
ALBE	RTO INTERIAN, ES	Q .				
		Name of Contact Person	l			
NEIM	an & Interian, Pi	LLC				
		Firm/ Company				
2020 F	ONCE DE LEON BO	OULEVARD, SUITE 1005H	ı			
		Address				
CORA	L GABLES, FLORIE	OA 33134				
		City/ State and Zip Code	,			
MBAN	ASCO@NIFLALAV	v.COM				
<u></u> Е-	mail address: (to be u	sed for future annual report	notification)			
For further information conce	rning this matter, plea	se call:				
ALBERTO INTERIAN		at (530-9400			
Name of Contr	act Person	Aren Coo	le & Daytime Telephone Number			
Enclosed is a check for the fo	lowing amount made	payable to the Florida Depa	riment of State:			
S35 Filing Fee	llowing amount made \$43.75 Filing Fee & Certificate of Status	payable to the Florida Depa S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	etment of State: \$\Bigsiz\$ \$\\$52.50 \text{Pitting Fee} \\ Certificate of Status \\ Certified \text{Copy} \\ (\text{Additional Copy} \\ is enclosed)			

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Articles of Amendment to Articles of Incorporation of

Articles of Incorporation of	
HATKO, INC.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
K51902	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendmets Articles of Incorporation:	ent(s) to
A. If amending name, enter the new name of the corporation:	
The nevaluation in the most of	
3. 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 office address;	2/
Name of New Registered Agent	รั
(Florida street address)	T.
New Recistered Office Address: , Florida (City) , Florida (City Code)	Til
iew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	Ö
Signature of New Registered Agent, if changing	
heck if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	

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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 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 latter of each office held.

President, Treasurer, Director would be PTD.

Changes should be noted in the following magner. Converted take Doc to listed as the DCT and Mike Investigation is Noted as the V. There is

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.

A_Change	PT Lo	ohn Doe	
X Remove	У М.	ike Jones	
_X Add	<u>SV</u> <u>So</u>	lly Smith	
Type of Action (Check One)	Title	Name	Address
1)Change		Gloria Patricia Sierra Jimenez	2020 Ponce de Leon Boulevard
Add			Suite 1005B
Remove			Coral Gables, Florida 33134
2) Change	Т	Clara Maria Sierra Jimenez	2020 Ponce de Leon Boulevard
Add			Suite 1005B
Remove 3) Change			Coral Gables, Florida 33134
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			2025
Add			
Remove			
6)Change			(O).
Add			7 17
Remove			6:50
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The date of each amendment(s date this document was signed.) adoption:	if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without shareholder	action and shareholder
The amendment(s) was/were by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendm sufficient for approval.	nent(s)
☐ The amendment(s) was/were : must be separately provided j	pproved by the shareholders through voting groups. The following sta or each voting group entitled to vote separately on the amendment(s):	lemeni
"The number of votes co	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
× Dated 2	Hay 2015	
× Signature	les he don	
(By a	director, president or other officer - if directors or officers have not be	en
≾eled	ed, by an incorporator + if in the hands of a receiver, trustee, or other anted fiduciary by that fiduciary)	court
	CLARA MARIA SIERRA JIMENEZ	
	(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
	DIRECTOR	202
	(Title of person signing)	\$ JU
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