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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates of	f Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE DIVISION OF CORPORATIONS

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COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: Snakes, Inc. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Simon E. Amich Name of Contact Person Sea Capital Partners Firm/ Company 5787 N. Bay Road Address Miami Beach, Florida, 33140 City/ State and Zip Code seacapitalpartners@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Simon E. Amich Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee **□\$43.75** Filing Fee & **□\$43.75** Filing Fee & ■\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed)

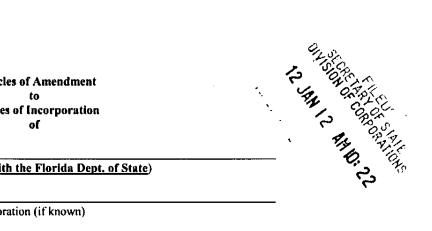
Mailing Address
Amendment Section

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



SNAKES, INC.

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

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(Document Number of Corporation (if known)

ent(s) to

A. If amending name, enter the new name of the corporation	7
name must be distinguishable and contain the word "corpor "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviatio	or "Co". A professional corporation name mu
B. Enter new principal office address, if applicable:	5787 N. BAY ROAD
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI BEACH, FLORIDA
	33140
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5787 N. BAY ROAD
-	MIAMI BEACH, FLORIDA
	33140
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office additional agent and/or the new registered office additional agent and/or the new registered office additional agent and/or registered office a new registered agent and/or registered office a new registered office and new registered office	ress: ICH Y ROAD
MIAMIREA	a street address) CH, Florida_33140
New Registered Office Address.	City) , 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)

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	PT Jo	ohn Doe	
X Remove	<u>V</u> <u>N</u>	fike Jones	
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
l) Change Add Remove	<u>DP</u>	EVELYN, DONNA	23245 SW 162ND AVENUE HOMESTEAD, FLORIDA 33031
2) Change Add Remove	SEC	EVELYN, DONNA	23245 SW 162ND AVENUE HOMESTEAD, FLORIDA 33031
Change X Add Remove	<u>PD</u>	AFRA LETICIA ALVARADO-AMICH	5787 N. BAY ROAD MIAMI BEACH, FLORIDA 33140
4) Change X Add Remove	DTS	SIMON E. AMICH	5787 N. BAY ROAD MIAMI BEACH, FLORIDA 33140
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
NOT APPLICABLE
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) NOT APPLICABLE

The date of each amendment(s)	adoption: DECEMBER 1, 2011
Effective date if applicable:	DECEMBER 1, 2011
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	st for the amendment(s) was/were sufficient for approval
by	"
	(voting group)
The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ac action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated DEC	EMBER 1, 2011
Signature	EMBER 1, 2011 ——— gamil
(By a select	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	SIMON E. AMICH
	(Typed or printed name of person signing)
	DIRECTOR
	(Title of person signing)