

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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H160001574023ABC-

To:	CC. 7-1-10
	Division of Corporations
	Fax Number : (850)617-6380
From:	
	Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
	Account Number: 110432003053
	Phone : (561)694-8107
	Fax Number : (561)694-1639
nter the	email address for this business entity to be used for future
	report mailings. Enter only one email address please.*** 5
	MATAGE.

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WHO I SHOULD BE			
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1 with the Florida Dept. of State)			
The state of the s			
oration (if known)			
da Profit Corporation adopts the following amendment(s) to			
The new			
company," or "incorporated" or the abbreviation A professional corporation name must contain the			
01 South Bayshore Drive, Suite 1800			
Miamì, Florida 33133			
01 South Bayshore Drive, Suite 1800			
ami, Florida 33133			
Florida, enter the name of the			
fress)			
1 6.107			
. Florida			

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)

Example:

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.

X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sully Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1)Change	VPSD	WEBB, HAL J	1001 BRICKELL BAY DRIVE
Add			SUITE 3112
X Remove			MIAMI, FL 33131
2) Change			
Add			
Remove			• • • • • • • • • • • • • • • • • • • •
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
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)
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)

The date of each amendment(s) adoption:	, if other than the
date this document was signed. July 1st, 2016	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	Il not be listed as the
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.	
☐ 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)	
(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.	
June 28th, 2016	
Dated	
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)	
Jessica Morales	
(Typed or printed name of person signing)	
Attorney in Fact	
(Title of person signing)	

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