Ma0638

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(Ad	dress)	
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SECRETARY OF STATE
ALLASASSEF, FLATER



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Elsa's Home Inc.

DOCUMENT NUMBER: M20638

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maria Juliana Ureta

Name of Contact Person

Elsa's Home Inc.

Firm/ Company

11700 sw 169 terr

Address

Miami Florida 33177

City/ State and Zip Code

mjummd@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria Juliana Ureta

 $_{\rm at}$ 786 $_{\rm 30}$

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

□ \$35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status

□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)

\$52.50 Filing Fee Certificate of Status Certified Copy (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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Elsa's Home Inc.

<u> </u>	sa's nome inc	; .		
(Name of Corporation a	s currently filed with the l	Florida Dept. of State)		_
	M20638			
(Docume	nt Number of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation	adopts the following	ng amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
	N/A			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations of the contract of t	nation "Corp," "Inc," or	"Co". A professional corpo	rporated" or the coration name must	abbreviation
B. Enter new principal office address,	if annlicable:	11700 sw 16	69 terr	
(Principal office address MUST BE A S		miami Fl. 33	miami FI, 33177	
				_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		11700 sw 169 terr		
		miami fl 331	77	
				_
D. If amending the registered agent an new registered agent and/or the ne			ame of the	
Name of New Registered Agent	Name of New Registered Agent Maria Juliana Ureta			
	11700 sw 16	9 terr		
	,	reet address)	_	
New Registered Office Address:	Miami		_{da} 33177	
	(City,)	(Zip Code)	
New Registered Agent's Signature, if of I hereby accept the appointment as regis	Hanging Registered Agent	t <u>:</u> with(and accent the obligati	ans of the position	
1/a	(WO) (grature of New Registered	Lueto	ons of the position.	12 MOV

(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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PSD	Alba Serrano	11700 sw 169 terr
Add			Miami FI 33177
X Remove			
2) Change	PSD	Maria Juliana Ureta ϺͿͺϽ	11700 sw 169 terr
X Add			Miami fL 33177
Remove			
3) Change '&		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			- · · · · · · · · · · · · · · · · · · ·
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
O Characa			
6) Change			
Add			
Remove			

•	v

V/A	ets, if necessary).	(Be specific)		
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provisions for imple	menting the amer	inge, reclassification dment if not contain	n, or cancellation of issue	ed shares, self:
(if not applicable	e, indicate N/A)			·····
V/A				
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• • •	intian 11/1/12
The date of each amendment(s) ac	loption:
Effective date <u>if applicable</u> : NA	4
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Signature (By a d	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	Maria Juliana Ureta
	(Typed or printed name of person signing)
	President
	(Title of person signing)
	MPAN/C. COSPANION MY COMMISSION & EE 199670 EXGRES: June 7, 2016 anded Jimu Nober/ Public Underwriters