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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
. (Ві	usiness Entity Name)	· · ·
(Do	ocument Number)	· ·
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section	_		
Division of Corporations)	+
NAME OF CORPORATION: NAME OF CORPORATION: RELEVENCE OF	De Kr	0/40	ciones to/Kloricas
"Keeverdo	s de ui	:1/	anama" INC.
DOCUMENT NUMBER:	VO70C	∞)8266
The enclosed Articles of Amendment and fee are sub-	mitted for filing.		
Please return all correspondence concerning this matter	er to the following	g:	
Hease return all correspondence concerning this matter. Liana TVarra	ra		
	(Name of Contac	t Person)
	(Firm/ Comp	oany)	
5954 Tivoli Orlando, Fl.	Gari	den	s Blud.
	(Address	s)	
Orlando, Fl.	3282	9	
	(City/ State and 2	Zip Code)
Eliana. Nho	Ma	CW report n	otification)
For further information concerning this matter, please	call:		
Eliang Herreva (Name of Contact Person)	at (107	, 227-0901
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Flori	da Depar	tment of State:
\$35 Filing Fee \$\text{Certificate of Status}\$	S43.75 Filing I Certified Copy (Additional copenclosed)	,	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Division	Address nent Section n of Corporations Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

(Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent. (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent:

Signature of New Registered Agent, if changing

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

Page 1 of 4

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: XChange	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
_X Add	<u>SV</u> <u>Sal</u>	ly Smith	,
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>S</u>	Mariae Celis	589 Windower OR Orando, FL32819
2) Change Add Remove	PS	ElianaHerrera	5954 Tivoli Gardens BILL Orland, FL 32829
Change Add Remove	<u>VP</u>	Aramis Carvajal	3701 Carrollwood Pl. Circle Apt. 312 Tampa, FL 33624
4) Change Add Remove		Sully Armien	10600 Bloomfield Dr. Apt. 1714 Orlando, Fr 32895
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)					
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The date of each amendment(s) ado	ption: Hpri 24, 2012
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)
There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s) was/were s.
Dated4/2	24/2012 Efiam J. Herron
Signature	Efrain 1. Herm
(By the chairm have not been	an/or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)
Elia	na N. Herrera
	Typed or printed name of person signing)
Pr	esident / Secretary
	(Title of person signing)