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TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	GRUPO BUSCAN	IDO HUMILDAD	INC			
	N16000008528					
DOCUMENT NUMBER:			-		-	
The enclosed Articles of Amenda	ment and fee are sub	mitted for filing.				
Please return all correspondence	concerning this matte	er to the following	:			
CESAR RUIZ						
		(Name of Contac	t Person	}		
N/A						
		(Firm/ Comp	any)		•	-
4300 N. UNIVERSITY DRIV	E, SUITE C-101					
	<u> </u>	(Address)			
LAUDERHILL, FLORIDA 33	3351					
		(City/ State and Z	ip Code)		
duitamense@hotmail.com						
E-ma	il address: (to be used	for future annual	report n	otification)	
For further information concerni	ng this matter, please	call:				
CESAR RUIZ			954 at		478-8277	
(Na	me of Contact Person)		a Code)	(Daytime Telephone Num	ber)
Enclosed is a check for the follow	wing amount made pa	yable to the Flori	da Depai	tment of S	State:	
	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing I Certified Copy (Additional co- enclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is	
Mailing Address Amendment Section			Street A	Address nent Secti	on	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

GRUPO BUSCANDO HUMILDAD INC

(Name of Corporation	as current	tly filed with the Florida Dept. of	State)		
N16000008528					
(Docur	ment Numbo	er of Corporation (if known)			
Pursuant to the provisions of section 617.1006. Flo amendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida Not For Profit Corp</i> e	oration adopts the	following	
A. If amending name, enter the new name of the	e corporati	on:			
N/A				The new	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		ion" or "incorporated" or the abbr	eviation "Corp."	_	
B. Enter new principal office address, if applica	4300 N. UNIVERSITY DRIVE				
(Principal office address MUST BE A STREET ADDRESS)		SUITE C-101			
		LAUDERHILL, FL 33351			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4300 N. UNIVERSITY DRIVE			
		SUITE C-101			
		LAUDERHILL. FL 33351			
D. If amending the registered agent and/or regi			me of the		
new registered agent and/or the new register	<u>agress:</u>		-13 		
Name of New Registered Agent:	N/A			<u> </u>	
	4300 N. UNIVERSITY DRIVE, SUITE C-101				
New Registered Office Address	:	(Florida street addı	ess)		
	LAUDER	HILL	Florida 33351		
		(City)	(Zip Code)		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered nt. I am far	Agent: miliar with and accept the obligation	ns of the position.		
-	Si	gnature of New Registered Agent, ij	Changing		

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 X Remove X Add	<u>V</u> <u>Mik</u>	n <u>Doe</u> e <u>Jones</u> v <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	P	CESAR RUIZ	4300 N. UNIVERSITY DRIVE
Add			SUITE C-101
Remove			LAUDERHIL, FL 33351
2) X Change	s	SONIA TUEROS SILVA	4300 N. UNIVERSITY DRIVE
Add	- 121		SUITE C-101
Remove			LAUDERHIL, FL 33351
3) X Change	T	HIPOLITO TUEROS	4300 N. UNIVERSITY DRIVE
Add			SUITE C-101
Remove			LAUDERHIL, FL 33351
4) Change			_
Add			
Remove			
5) Change			_
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional A attach additional sheets, if necessary)	. (Be specific)				
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			u	<u> </u>	
					
					
<u> </u>	·				
		•			
		mr== ·			

	•	, N/A	
The	date of each amendm	ent(s) adoption:	_, if other than the
date	this document was sign	ned.	
		09/07/2016	
Effe	ctive date <u>if applicabl</u>	e:	
		(no more than 90 days after amendment file date)	
		n this block does not meet the applicable statutory filing requirements, this date will not be not the Department of State's records.	e listed as the
Ado	ption of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficient fo	s/were adopted by the members and the number of votes east for the amendment(s) r approval.	
	There are no members adopted by the board	or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.	
	09 Dated	/07/2016	
		(
	Signature	eur roome	_
	ha	the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)	
		CESAR RUIZ	
		(Typed or printed name of person signing)	
		PRESIDENT	
		(Title of person signing)	