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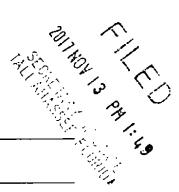
TO: Amendment Section Division of Corporations

NAME OF CORPORATION	HOST A HERO	O, INC.				,
DOCUMENT NUMBER: _	117000009455		<u>.</u>			
The enclosed Articles of Ame	ndment and fee are subn	nitted for filing.				
Please return all corresponden	ce concerning this matte	to the following:	٠.			
Mario A. Lamar, Esq	•	•	,			
		(Name of Contact I	Person)	-	<del></del>	
Mario A. Lamar P.A.			-	,		
		(Firm/ Compar	ıy)		<u> </u>	<del> </del>
3971 SW 8 St. Suite 305						
		(Address)	,	<u> </u>	_	<u></u>
Miami, Florida 33134					. •	
	,	(City/ State and Zip	Code)			
mlamar@lamarlaw.com						
E-	mail address: (to be used	for future annual re	port notifi	cation	)	
For further information conce	ming this matter, please	call:				
Mario A. Lamar		•	305 it		442-4748	
·(	Name of Contact Person		(Area C	ode)	(Daytime Telep	none Number)
Enclosed is a check for the fo	llowing amount made pa	yable to the Florida	Departme	nt of S	State:	
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)	is (	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	

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 of



HOST A HERO, INC.		
(Name of Corporation as cu	rrently filed with the Flo	rida Dept. of State)
N17000009455		
(Document N	lumber of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	tatutes, this <i>Florida Not Fo</i>	er Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
		The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporated	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRI</u>	ESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe	ered Agent:	
I hereby accept the appointment as registered agent. I a	m familiar with and accept	the obligations of the position.

Signature of New Registered Agent, if 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>	<u>1 Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>D</u>	Edward Jerome Downs	6808 SW 81st St
x Add			Miami, FL 33143
Remove			
2) Change	D	Jose Diaz	8345 NW 12th Street
Add			Miami, Fl 33261
Remove			
3 ) Change	S	Jose Diaz	8345 NW 12th Street
XAdd			Miami, Fl 33261
Remove			
4) Change	D	Alexa G. Rodriguez	4661 SW 71 AVE
Add			Miami, Fl 33155
Remove			
5) Change			
Add			
Remove			-
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
·	
-	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 da document's effective date on the Department of State's records.	te will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment was/were sufficient for approval.	ent(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/w adopted by the board of directors.	ere
Dated 10/30/17	
Signature	
(By the chairman or vice chairman of the board, president or other officer-if direct have not been selected, by an incorporator – if in the hands of a receiver, trustee, other court appointed fiduciary by that fiduciary)	
ALEGANORO POORIGUEZ	
(Typed or printed name of person signing)	
President	
(Title of person signing)	