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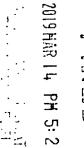
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R. WHITE MAR 2 5 2013

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	Manos L	impias	USA	INC	
DOCUMENT NUMBER:NTG	70000021	34			
The enclosed Articles of Amendmer	$oldsymbol{u}$ and fee are subm	itted for filing.			
Please return all correspondence cor	ncerning this matter	to the following:			
	Fer	nando For	1 C <i>e c</i> a .		
		Name of Contact Po			
	••••	(Firm: Company	·)		
	7650 L	YONS RO	ને .		
	······································	(Address)			
	Coconut	CREEK,	FL 334	133	
	(City/ State and Zip	Code)		
Feri	contlo C	Yohoo. cor	n ·		
P-mail action for further information concerning t			ort notification)	
Fernando For			561-	344-2997	
	of Contact Person)	at	(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the following	g amount made pay	able to the Florida I	Department of S	State:	
	.75 Filing Fee & I tificate of Status	S43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	O Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address Amendment Section		Street Address Amendment Section			
Division of Corpo P.O. Box 6327	Division of Corporations Clifton Building				

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

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FILED

Manos Limpia (Name of Corporation as current	IS USA	N CUSHAR LL PH 5: 19
		STORAGE STATE
(Document Number	er of Corporation (i	f known)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	•	
A. If amending name, enter the new name of the corporati	on:	
N/A		The new
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	uon" or "incorpora	ited" or the abbreviation "Corp." or "Inc."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA.	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	NA	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		da, enter the name of the
Name of New Registered Agent: N/k	<u> </u>	
N/V	L.	
New Registered Office Address:	<u> </u>	(Florida street address)
N_	IA	, Florida (Zip Code)
/	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far		ept the obligations of the position.
	N/A-	gistered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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:

 $P = President; V \subseteq Vice President; T \equiv Treasurer; S \equiv Secretary; D \supseteq Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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	PT John D Y Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change X Add Remove	<u>D</u>	Gustavo Bolivar More	no 12388 North Bay Shore DR North Miami FL 33181.
2) ChangeX_ Add	<u></u>	Luis A. Quevedo	90 sw 3st Apt. 1406. Migmi, FL 33130
Remove 3.)ChangeAddRemove	<u>S</u>	Samira Condelaria	8166 Mizner Lane B Boca Roton, FL 33433
4) Change Add Remove			
5) Change Add Remove			
6) Change Add	****************		

<u>If amending or adding additional Articles, enter change(s) here:</u> (attach additional sheets, if necessary). (Be specific)	
	•

The date of each amendment(s) adoption: date this document was signed.	Horeh	5,_	2019.		, if other than th
Effective date <u>if applicable</u> :					
(1)	no more than '	90 days	after amendmer	n file date)	
Note: If the date inserted in this block does document's effective date on the Departmen			le statutory filin	g requirements, this date	will not be listed as the
Adoption of Amendment(s) (CHECK ON	<u>E</u>)			
The amendment(s) was/were adopted b was/were sufficient for approval.	y the member:	s and the	e number of vot	es cast for the amendmen	1(s)
	vice chairman ted, by an ince	of the b	oard, president r – if in the hanc	e amendment(s) was/wer or other officer-if directo Is of a receiver, trustee, o	rs
	·		Fonse ted name of pers		_
	Pr		dent.	<u> </u>	_
		(T)	tle of person sig	ning)	