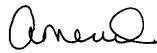
(Reque	estor's Name)	<u> </u>
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	,	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
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2/19/10

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Ministeric	o de Enseñanza	LA Palabra Revela
DOCUMENT NUMBER:N95	5000000 24	0
The enclosed Articles of Amendment and fee are su	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Victorio G (Name o	rarcia - Barbon of Contact Person)	**************************************
Ministerlo de E	nsenanza LA Pala m/Company)	abra Revelada
17546 SW 4	8 street (Address)	
Miramar F	Lorida 3302 tate and Zip Code)	.9
BLAS And Chach E-mail address: (to be us	nie @ bellSovth. sed for future annual report notific	net ation)
For further information concerning this matter, plea	ase call:	
Victorio Garcia - Barbon (Name of Contact Person)	at (786)	3, 5290 me Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida Departmen	nt 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 Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	er Circle

Articles of Amendment

FILED

Articles of Incorpora	SECRETARY SECRETARY
Ministerio de Enseñanza LA P (Name of Corporation as currently filed with the	alabra Revelotada HASSIGE STATE
(Name of Corporation as currently filed with the	e Florida Dept. of State)
N95 0000	
(Document Number of Corporation	(if known)

A. If amending name, enter the new name of the corporation:

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:

The new 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. 6067 Hollywood Blvd. Hollywood, Flonida 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: New Registered Office Address: (Florida street address) , Florida_ (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
nicector	Sergio Alba		☐ Add
			Add Remove
E. If amendir	ng or adding additional Articles, enteritional sheets, if necessary). (Be spec	r change(s) here: ific)	
			47
	W		
	,		

The date of each amendment(s) adoption:	_ teb	10.	20	U	
Effective date if applicable:	(date of adoption	n is red	juired) 20	10	
(no more	than 90 days afte	r amen	dment f	île date)	
Adoption of Amendment(s) (CHI	ECK ONE)				
The amendment(s) was/were adopted by the was/were sufficient for approval.	members and the n	ıumber	of vote	s cast for the	amendment(s)
There are no members or members entitled to adopted by the board of directors.	o vote on the amen	ndment	(s). The	e amendment	(s) was/were
DatedFeb·10	0. 2010 V	١			
Signature	1	<u> </u>			
(By the chairman or v have not been selecte other court appointed	d, by an incorpora	ator – i	f in the		
	ctorio Ga ed or printed name				_
	Presid				
	(Title of person s	signing)		