## P00000032652

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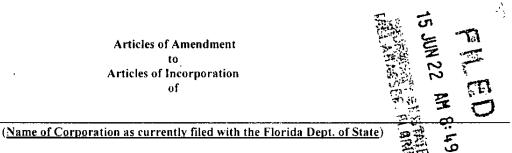
## **COVER LETTER**

TO: Amendment Section
Division of Corporations

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NAME OF CORPO	RATION: FABED, INC.				
DOCUMENT NUMBER: P00000032652					
	s of Amendment and fee are su			<b>S</b>	
	espondence concerning this mat	_			
Please return all corre	espondence concerning this mai	iter to the following.			
	FABIO DIAZ				
		Name of Contact Persor	1		
	PRESIDENT				
		Firm/ Company			
	2212 SW 8 ST			···	
	Address				
	MIAMI FL 33135				
		City/ State and Zip Code	e		
FAI	BIODIAZVILELA@YAHOO.	СОМ			
	E-mail address: (to be us	sed for future annual report	notification)	-	
For further informati	on concerning this matter, pleas	se call:			
FABIO DIAZ		at ( 305	297-5238		
Name	e of Contact Person	Area Co	de & Daytime Telephone No	ımber	
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment 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		Street Address			

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** Articles of Incorporation of



FABED, INC.

P00000032652 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida 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," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association." or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)

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) Florida New Registered Office Address:

## New Registered Agent's Signature, if changing Registered Agent:

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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)

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	<u>PT</u>	John Doe			
X Remove	V	Mike Jones			
<u>X</u> Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s		
1) Change	VP	OTERO, MARIA E	2212 SOUTHWEST 8TH STREET		
Add _X Remove			M1AM1 FL 33135		
2) Change					
Add					
Remove					
3 ) Change	-himan ambanusa vovi				
Remove					
4) Change	<u> </u>				
Add Remove					
5) Change					
Add					
Remove					
6)Change					
Add					
Remove					

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	Attach <i>addi</i>	z or adding additional Ar tional sheeis, if necessary).	(Be specific)	eds nere.		
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provisions for implementing the amendment if not contained in the amendment itself:						
	provisions	for implementing the am	hange, reclassific endment if not co	eation, or cancella entained in the am	tion of issued shar endment itself:	res,
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	-				<del>, ,</del>	*
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The date of each amondation	06/15/2015	Fashan shan sha
The date of each amendment date this document was signed		, if other than the
date this document was signed	·	•
Effective date if applicable:	06/15/2015	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/wei by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendate sufficient for approval.	ment(s)
	e approved by the shareholders through voting groups. The following st d for each voting group entitled to vote separately on the amendment(s)	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	, n	
	(voting group)	
action was not required.  The amendment(s) was/wer action was not required.  06/15.  Dated	e adopted by the board of directors without shareholder action and shareholder action a	
se	y a director, president or other officer if directors or officers have not lected, by an incorporator if in the hands of a receiver, trustee, or othe pointed fiduciary by that induciary)  FABIO DIAZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	