P00000051242 Charter Number Only

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MIRIAM FUNDORA

Requestor's Name

4037 SW 96 RVE.

Address

Miami FL 33165

City State ZIP Phone

(305)559-8356A



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CORPORATION(S) NAME

W.P. Verifier

PROGRASS	Services	Corp.	
() Profit			<u> </u>
() NonProfit	Amendment	(
() Foreign	() Dissolution		() Mark
() Limited Partnership () Reinstatement	() Annual Report () Reservation	:	() Mark () Other () Change of Registered Agent () Certificate Under Seal () After 4:30
() Certified Copy	() Photo Copies	(() Certificate Under Seal
() Call When Ready) Walk in (() Call If Problem) Will Wait	Pick Up	() After 4:30 () Mail Out
Name Availability		· `	
Document Examiner		<u></u>	
Updater		. ==	
Verifier			2000
Acknowledgment		OULLIETTE DEC 18	



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 12, 2000

EMPIRE

TALLAHASSEE, FL

SUBJECT: PRO GRASS SERVICES CORP.

Ref. Number: P00000051242

We have received your document for PRO GRASS SERVICES CORP. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

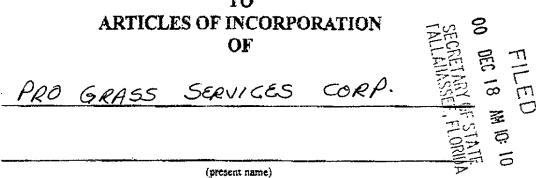
If you have any questions concerning the filing of your document, please call (850) 487-6903.

Cheryl Coulliette Document Specialist

Letter Number: 000A00062612

PECEIVED OF COMPORATION

ARTICLES OF AMENDMENT TO



Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)

PRINCIPAL OFFICE NEW- 4037 SW 96 ARE- MIAMI Ple 33165 ARTICLE 111 REGISTER AGENT ARTICLE SI NEW- HECTOR MODESTO OSORTO. 4037 SW 94 AR- MIANI- PL 33165 DIRECTORS ARTICLE NEW- HE CTOR MODESTO OSCRTO 4037 SW 94 AR - MIANI- FL 33165

SECOND: 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, are as follows:

SEPTEMBER- 15-2000 THIRD: The date of each amendment's adoption:

FOUR	RTH: Adoption of Amendment(s) (CHECK ONE)			
3	The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.			
3	The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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"			
	voting group			
	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.			
¥	The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.			
	Signed this 15 day of September, 2000.			
Signa	ture y Alton n			
•	(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)			
	OR			
	(By a director if adopted by the directors)			
	OR			
	(By an incorporator if adopted by the incorporators)			
	RAMON E. ALTANIRANO Typed or printed name			
	· yped or printed name			

PRESIDENT & INCORPORATOR.

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

PRO GRASS SERVICES CORP.

(Name of Corporation)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

REGISTERED AGENT