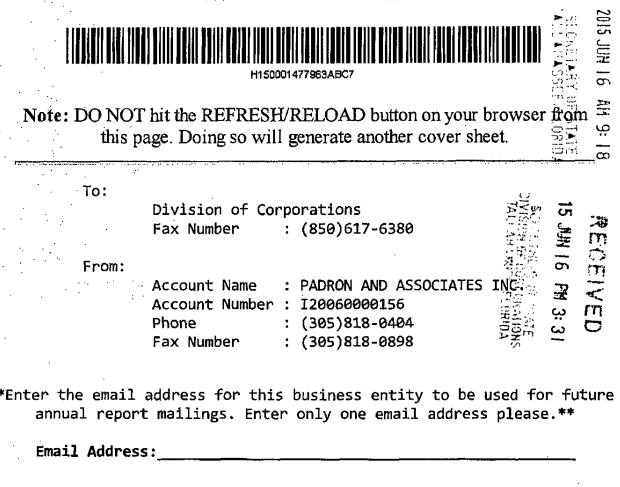
Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000147796 3)))



COR AMND/RESTATE/CORRECT OR O/D RESIGN BELMAR & ASSOCIATES, INC.

| Certificate of Status | 1 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$43.75 |

'JUN 17 2014

C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION | BELM | 1AR & ASSOCIATES, INC | <u> </u> | |
|-----------------------------------|---|--|--|--|
| DOCUMENT NUMBER: | P0000005698 | 1 | | |
| The enclosed Articles of Amen | dment and fee are st | ubmitted for filing, | | |
| Please return all correspondence | e concerning this ma | atter to the following: | | |
| | | FRANK DE LA PAZ | | |
| 41000 | | Name of Contact Perso | n | |
| • | | Firm/ Company | | |
| • | 23 | 300 W 84TH STREET SUI | TE 200 | |
| | | Address | | |
| | | HIALEAH, FL 3301 | 6 | |
| | | City/ State and Zip Cod | e | |
| | I | EQUALSERVICES@GMA | IIL.COM | |
| E-n | nail address: (to be u | sed for future annual report | notification) | |
| For further information concern | ing this matter, plea | se call: | | |
| FRANK DE LA PAZ | | at (³⁰⁵ | 596-5655 de & Daytime Telephone Number | |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check for the follo | owing amount made | payable to the Florida Depa | artment of State: | |
| | 43.75 Filing Fee & ertificate 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 Add | | | Address | |
| Amendment S Division of C | | Amendment Section Division of Corporations | | |
| P.O. Box 632 | | | Building | |
| Tailahassee, I | L 32314 | | xecutive Center Circle | |

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

| of Corporation as currently filed with the Fi | |
|--|--|
| A COMPONATION AS CHARGINAL MEN WITH THE P. | lorida Dent. of State) |
| P0000056981 | |
| (Document Number of Corporation (if kr | nown) |
| 1006, Florida Statutes, this Florida Profit Cor | rporation adopts the following amendment |
| nme of the corporation: | The Triew |
| tain the word "corporation," "company," o ation "Corp," "Inc," or "Co". A profession tion," or the abbreviation "P,A." | or "incorporated" or the abbreviation and corporation name must contain the |
| if applicable: TREET ADDRESS) | <u> </u> |
| d/or registered office address in Florida, ent | ter the name of the |
| FRANK DE LA PAZ | |
| | |
| 2300 W 84TH STREET SUITE 200 | |
| 2300 W 84TH STREET SUITE 200 (Florida street address) | |
| | Florida 33016 |
| t with in | me of the corporation: Tain the word "corporation," "company," of ation "Corp," "Inc," or "Co". A professiontion," or the abbreviation "P.A." If applicable: TREET ADDRESS) Cable: DFFICE BOX |

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.

| X Change | PT | John Doe | |
|-------------------------------|--------------|-----------------|---------------------------|
| X Remove | <u>v</u> | Mike Jones | |
| _X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| I) Change | PD | BELKYS LEYVA | 5401 COLLINS AVE UNIT CUS |
| X Remove | | | MIAMI BEACH FL 33140 |
| 2) Change | VP | MARTA ARENCIBIA | 5401 COLLINS AVE UNIT CUS |
| Add X Remove | | | MIAMI BEACH FL 33140 |
| 3) Change | PSD | PEDRO V ACOSTA | 5401 COLLINS AVE UNIT CU5 |
| X Add | | | MIAMI BEACH FL 33140 |
| Remove | | | |
| 4) Change | | _ | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |



| (Attach addir | or adding additional Article ional sheets, if necessary). | (Be specific) | | | |
|---------------|---|---|--|-------------------------|--|
| N/A | | | | | |
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| provisions | ment provides for an exchan for implementing the amend pplicable, indicate N/A) | ge, reclassification, ment if not containe | or cancellation of iss d in the amendment | sued shares, itself: | |
| ī/A | | | | | |
| , <u> </u> | | | | | |
| <u></u> | <u> </u> | | | | |
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| | JUNE 09, 2015 | |
|--|---|--------------------------|
| The date of each amendment(s) and date this document was signed. | option: | , if other than the |
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this b document's effective date on the De | lock does not meet the applicable statutory filing requirements, this date we partment of State's records. | ill not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were ado by the shareholders was/were sur | pted by the shareholders. The number of votes east for the amendment(s) ficient for approval. | |
| | roved by the shareholders through voting groups. The following statement 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) | |
| . , | (voting group) | |
| ☐ The amendment(s) was/were ado action was not required. | pted by the board of directors without shareholder action and shareholder | |
| | oted by the incorporators without shareholder action and shareholder | |
| action was not required. | \sim \sim | |
| JUNE 09 | 2,201/5 | |
| Dated | | |
| Signature | 1 4.1 | |
| By a di | rector, resident or other officer - if directors or officers have not been | |
| selected | , by an incorporator - if in the hands of a receiver, trustee, or other court | |
| appoint | ed fiduciary by that fiduciary) | |
| | PEDRO V ACOSTA | |
| • | (Typed or printed name of person signing) | |
| • | PRESIDENT | |
| · · · · · · · · · | (Title of person signing) | |