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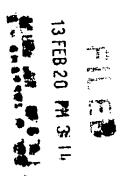
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(Address)	_
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: KEY OCEA	N PROPERTIE	S 402, INC
DOCUMENT NUMB	_{ER:} <u>P0000009849</u>	98	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corres	condence concerning this ma	tter to the following:	
	BENJAMIN, GRA	CIELA	
-		Name of Contact Person	1
-		Firm/ Company	
_	170 OCEAN LAN	IE DR # 402	
	KEY DIOCAYNE	Address	
-	KEY BISCAYNE	City/ State and Zip Code	
		•	
GR	ACHIBENJAMIN(D3@HOTMAIL.C	
	r-mail address: (to be di	sed for future annual report	nothication)
For further information	concerning this matter, pleas	se call:	
DAVID STON	E	at (305	_, 374001
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Amer Divis P.O.	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section of Corporations Building xecutive Center Circle ussee, FL 32301

Articles of Amendment Articles of Incorporation

KEY OCEAN PROPERTIES 402, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P00000098498

(Document Number of Corporation (if known)

Jake 20 mail Pursuant to the provisions of section 607 1006. Florida Statutes, this Florida Profit Cornoration

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me must be distinguishable and contain the "orp.," "Inc.," or Co.," or the designation "C ord "chartered," "professional association," or	Corp." "Inc." or "Co". A p		ated" or the abb
Enter new principal office address, if applic rincipal office address <u>MUST BE A STREET</u> .			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)		
If amending the registered agent and/or reg new registered agent and/or the new registe	istered office address in Flored office address:	rida, enter the name	of the
new registered agent and/or the new registe	istered office address in Flo red office address:		of the
new registered agent and/or the new registe	ered office address:		of the
new registered agent and/or the new registe	red office address: (Florida street address)		
Name of New Registered Agent Name of New Registered Agent	red office address:		of the

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: V =

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	n Doe		
X Remove	<u>V</u> <u>Mik</u>	Mike Jones		
X Add	<u>SV</u> <u>Sall</u>	y Smith		
Type of Action (Check One)	<u>Title</u>	Name	Address	
1) Change	DIR/PRES.	MARIA BENJAMIN	80 S.W. 8 STREET, SUITE 2803	
Add			WORLD TRADE CENTER	
X Remove			MIAMI FL. 33130	
2) X Change	PS	BENJAMIN, GRACIELA	170 OCEAN LANE DR # 402	
Add			KEY BISCAYNE FL 33149	
Remove				
3) Change	VT	KOVAR, DARIO	170 OCEAN LANE DR # 402	
X Add			KEY BISCAYNE FL 33149	
Remove				
4) Change				
Add				
Remove				
51 Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
ARTICLE VI. OFFICERS AN DIRECTOR:
The company shall have two officer and two directors:
The Officers of the company shall be:
PRESIDENT: BENJAMIN, GRACIELA.
ADDRESS: 170 OCEAN LANE DR # 402, KEY BISCAYNE FL. 33149
VICE PRESIDENT: KOVAR, DARIO
The Directors of the company shall be:
DIRECTOR: GRACIELA, BENJAMIN
ADDRESS: 170 OCEAN LANE DR # 402, KEY BISCAYNE FL. 33149
DIRECTOR: KOVAR, DARIO
ADDRESS: 170 OCEAN LANE DR # 402, KEY BISCAYNE FL. 33149
F. 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)

The date of each amendment	t(s) adoption: November, 20 2012
Effective date if applicable:	November, 20 2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/wei by the shareholders was/was/was/was/was/was/was/was/was/was/	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s east for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated Nov	vember, 20 2012
Signature	yember, 20 2012 Auilo ben's Gui Gui Gers have not been
(B	Ya director, president or other officer F if directors or officers have not been before F in the hands of a receiver, trustee, or other court
	pointed fiduciary by that fiduciary)
•	BENJAMIN, GRACIELA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)