7/02/2010 13:18 TPLUS CONSULTING oartmEnt/of tate División óf Corporation etfonic Filing Cov 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, (((H10000154030 3))) H100001540303ABCO Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. To: Division of Corporations Fax Number : (850) 617-6380 From: : AIT PLUS CONSULTING Account Name Account Number : I2008000061 : (407)582-9830 Phone : (407)582-9832 Fax Number õ **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address: AM 8: 0(ORID / RECEIVEL COR AMND/RESTATE/CORRECT OR O/D RESIGN ပ်္ဂ PRADO'S CO. 2010 JUL -2 Certificate of Status Ð Certified Copy Û Page Count 01 \$35.00 **Estimated** Charge 7.6.10 Electronic Filing Menu Corporate Filing Menu Help

07,	02/2010	13:18	4075829832		AIT PL	US CONSULTING	ł	PAGE	02
				COVI	R LETTER				
	TO: Amendment Section Division of Corporations								
	NAME O	F CORP(DRATION:		PRAD	0'S <u>CO.</u>		-	
	DOCUM	ENT NÚN	1BER;		P010	000062921		-	
	The enclo	sed Article	ling.						
	Please ret	um all con	owing:						
			(GEREMIAS	A. DOS SA	NTOS			
			· · · · · · · · · · · · · · · · · · ·		f Contact Person		<u> </u>		
				PRA	DO'S CO.				
		_	··· ··································	Firr	n/ Company				
				1350 QUA	DOW CRES	TD			
		_	<u> </u>	· · · · · · · · · · · · · · · · · · ·	Address		· ·		
			11						
				City/ St	ate and Zip Cod	Ċ			
				maria@ai	tplus.com				
			E-mail address: (t	o be used for t	uture annual rep	ort notification)			
	For furthe	r informat	ion concerning this	matter, pleas	e call:				
			AS A. DOS SANTO	-	407	583	2-9830		
			f Contact Person		+++ (de & Daytime Telep		•	
	Enclosed is a check for the following amount made payable to the Florida Departm								
	🗋 \$35 Filin	g Fce	S43.75 Filing Fee Certificate of State		S43.75 Filing Certified Cop (Additional co		S52.50 Filing I Certificate of S Certified Copy (Additional Co	Status 1	:d)
		ailing Ado			Street Addre				
		nendment			Amendment !				
		0. Box 63	Corporations 27		Division of C Clifton Build				
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	,				Tallahassee, l	FL 32301			

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					G PAGE 03 2018 JUL -2 AM 10: 10
			Articles of A	mendment	2818 111
			··· JUL -2		
			- AI1 10: 10		
			Martin Provide And		
		F			
	(Name o	of Corporation as c	<u>te</u>)		
	<u>.</u>	F			
		(Document)			
Pursuant to amendment(the provisi (s) to its Ar	ons of section 607. ticles of Incorporation	1006, Fiorida Statu on:	tes, this <i>Florida Profit (</i>	Corporation adopts the following
A. lfamen	ding name	enter the new nan	ne of the corporatio	<u>n;</u>	
name must abbreviation name must d	n "Corp.,"	The new or "incorporated" or the A professional corporation on "P.A."			
		al offic <u>e address, if</u>	RESTPL		
(Principal o	ffice addre	ss <u>MUST BE A STI</u>	<u>REET ADDRESS</u>)	ORLANDO, FL 328	111
					· · · · · · · · · · · · · · · · · · ·
		<mark>address, if applics</mark> AY BE A POST OF		4359 SHADOW CR	FST PI
, ,					
				ORLANDO, FL 328	1
D. <u>If ameno</u> new regi	<u>ding the re</u> istered age	<u>gistered agent and/</u> nt and/or the new 1	or registered office registered office ad	address in Florida, ente	er the name of the
			egistered onnee ad		
Nam	<u>te of New R</u>	egistered Agent:	<u> </u>		-
<u>New</u>	<u>Registered</u>	Office Address:			
					Florida
			(City)	. (Zip	(ode)
New Remiste	ered Agont	's Signature, if cha			
I hereby acc	ept the app	ointment as register	ed agent. I am fami	<u>sens:</u> liar with and accept the o	bligations of the position.
		·		A	
		-	Signature of New	Registered Agent, if chan	dina.

Page 1 of 3

7/02/2010	13:18 4075829832	AIT PLUS CONSULTIN	IG
<u>remoyed ar</u>	g the Officers and/or Directors, enter ad title, name, and address of each Off (tional sheets, if necessary)	<u>the title and name of each officer/d</u> ficer and/or Director being added:	lirector being
<u>Title</u>	Name	Address	Type of Action
VP	NILSON S. PRADO	4413 S KIRKMAN RD # 209 ORLANDO, FL 32811	Add Remove
D	MARCOS S. FERREIRA	4413 S KIRKMAN RD # 209 ORLANDO, FL 32811	_ □ Add □ ☑ Remove
D	RONELP. DOS SANTOS	4359 SHADOW CREST PL ORLANDO. FL 32811	Add
		······	
<u>provisia</u>	nendment provides for an exchange, reasons for implementing the amendment i or applicable, indicate N/A)	eclassification, or cancellation of is if not contained in the amendment	<u>sued shares,</u> itself:
		·····	

PAGE 04

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The date of each amendment(s) adoption: 07/02/2010								
Effective dat	(date of adoption is required) Effective date if applicable:							
Sheetire Gat	- <u>n applicat</u>	(no more l	han 90 days after i	amendment f	île date)			
Adoption of a	Amendment	(s)	(CHECK ONE)					
The amen by the sha	dment(s) was reholders wa	/were adopted b s/were sufficien	by the shareholders It for approval.	s. The numbe	er of votes cast fo	r the amendment(s)		
			by the sharcholde poting group entitle			following statemen endment(s):	t	
"The	number of vo	otes cast for the	amendment(s) was	s/were suffici	ient for approval			
by		(voting gro	up)		», •			
	dment(s) was s not required		by the board of dire	ectors withou	it shareholder acti	on and shareholder		
	dment(s) was s not required		by the incorporator	s without sha	areholder action a	nd shareholder		
·	Dated_0	7/02/2010						
	Signatur	•_ Ger	emines A	. dos!	Sounto			
		selected, by an	president or other of incorporator – if in iary by that fiducia	n the hands of				
			GEREMIAS	A. DOS S	ANTOS			
			(Typed or printed	d name of pe	rson signing)			
			PR	RESIDENT				
		т) Т	itle of person signi					
	,							
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