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(((H09000197695 3)))



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CESA ADMINISTRATIVE SERVICES, INC.

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T Roberts SEP. 10 2009 09/09/09



September 10, 2009

#### FLORIDA DEPARTMENT OF STATE

CESA ADMINISTRATIVE SERVICES, INC.

Division of Corporations
8770 SUNSET DRIVE

# 366

MIAMI, FL 33173

SUBJECT: CESA ADMINISTRATIVE SERVICES, INC.

REF: P01000071438

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Tina Roberts Regulatory Specialist II FAX Aud. #: H09000197695 Letter Number: 509A00029960

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

### Articles of Amendment to Articles of Incorporation of

	01 .		104
CESA	ADMINISTRATIVE SE	RVICES, INC.	•
	rrently filed with the Florida		
	P01000071438		
(Document )	Number of Corporation (if know	1)	
ursuant to the provisions of section 607. mendment(s) to its Articles of Incorporation	1006, Florida Statutes, this <i>Flor</i> n:	ida Profit Corporation ado	pts the following
. <u>If amending name, enter the new дят</u>	e of the corporation:		
			The new
ame must he distinguishable and conta hbreviation "Corp.," "Inc.," or Co.," or ame must contain the word "chartered," "	the designation "Corp," "Inc,"	or "Co". A professional c	d" or the orporation
. Enter new principal office address, if	applicable:	a.a. a. a. a.	_
Principal office address <u>MUST BE A STR</u>		•	_
			_
			_
. Enter new mailing address, if applica (Mailing address MAY BE A POST OF			
(muning dances may be a reast or			
			_
		-	_
. If amending the registered agent and/	or registered office address in l	Florida, enter the name of t	he
new registered agent and/or the new r	egistered office address:		· ·
Name of New Registered Agent:	Accounting Guide Serv	ces. Inc.	
Non-Business LOG-LA-Library	6135 NW 167th Street		
New Registered Office Address:	(Florida street add	ress)	
, · · ·	Hlaleah	, Florida 3301 (Zip Code)	5
•	(City)	(Zip Code)	
ew Registered Agent's Signature, if char	nging Degistered Agant	,	
hereby accept the appointment as registere		accept the obligations of the	e position.
	huacu		-
	Signature of New Registered	<del> </del>	
		A POWER OF THE PROPERTY OF THE	
		<u>,                                      </u>	

Page 1 of 3

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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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>PSD</u>	NICOLAS ESCALLON	141 CRANDON BLVD # 344 KEY BISCAYNE, FL 33149	☑ Add □ Remove
			_ □ Add · _ □ Remove
• <del></del>			□ .Add □ Remove
(allach a	dditional sheets, if necessary). (Be sp	necijic)	
			,
provisi	mendment provides for an exchange, ons for implementing the amendment of applicable, indicate N/A)	reclassification, or cancellation of i t if not contained in the amendmen	ssued shares, \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

## но9000197695 3

The date of each amendment(s) adoption; SEPTEMBER 1, 2009				
	(date of adoption is required)			
Effective date <u>if applicable</u>	(no more than 90 days after amendment file date)			
Adoption of Amendment(	e) ( <u>CHECK ONE</u> )			
The amendment(s) was/ by the shareholders was	were adopted by the shareholders. The number of votes east for the amendment(s) were sufficient for approval.			
The amendment(s) was/ must he separately prov	were approved by the shareholders through voting groups. The following statement idea for each voting group entitled to vote separately on the amendment(s):			
"The number of vot	es east for the amendment(s) was/were sufficient for approval			
by	·			
•	(voting group)			
action was not required.	were adopted by the board of directors without shareholder action and shareholder were adopted by the incorporators without shareholder action and shareholder			
Signature ( s	By a director, president or other officer in directors or officers have not been elected, by an incorporator — if in the hands of a receiver, trustee, or other court propinted fiduciary by that fiduciary)			
•				
	NICOLAS ESCALLON			
	(Typed or printed name of person signing)			
	PRESIDENT - DIRECTOR			
	(Title of person signing)			