P02000013457

(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Ві	usiness Entity Nar	ne)
(Do	ocument Number)	
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SECRETARY OF SIAIL DIVISION OF CORPORATIONS

And CC 10/20/12

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: A DOCUMENT NUMBER: P02	GUIAR AND 000013457	ASSOCIA	ATES, INC.
The enclosed Articles of Amendment	nt and fee are submitted for	or filing.	
Please return all correspondence cor	ncerning this matter to the	following:	
GUMA	AGUIAR		
AGUIA	Name	of Contact Person	, INC.
1500.0	SE 10TH STF	irm/ Company	· · · · · · · · · · · · · · · · · · ·
1500 8	SE TOTA STA	Address	
FORT	LAUDERDAI	LE, FL 33	316
	City/ S	State and Zip Code	
	UIAR@AOL		
E-mail a	ddress: (to be used for fut	ure annual report no	otification)
For further information concerning	his matter, please call:		
GUMA AGUIAR		at (954	294-8232
Name of Contact Per	son	Area Code	& Daytime Telephone Number
Enclosed is a check for the followin	g amount made payable to	the Florida Depart	ment of State:
	cate of Status Certi	75 Filing Fee & fied Copy litional copy is (Additional Co	□\$52.50 Filing Fee Certificate of Status Certified Copy py is enclosed)
Mailing Address Amendment Secti Division of Corpo P.O. Box 6327 Tallahassee, FL 3	rations	Division Clifton B 2661 Exe	ent Section of Corporations

Articles of Amendment to Articles of Incorporation

(Name of Corporation as		
	currently filed with the Florida D	ept. of State)
02000013457		
(Document	Number of Corporation (if known)	
uant to the provisions of section 607.1 rticles of Incorporation:	006, Florida Statutes, this <i>Florida I</i>	Profit Corporation adopts the following a
f amending name, enter the new nar	ne of the corporation:	
N/A	· · · · · · · · · · · · · · · · · · ·	
iv / A	nin the word "cornoration" "con	T npany," or "incorporated" or the abb
rp.," "Inc.," or Co.," or the designa	tion "Corp," "Inc," or "Co". A	professional corporation name must con
d "chartered," "professional associati	on," or the abbreviation "P.A."	1 0
<u>Enter new principal office address, it</u>	f applicable:	<u> </u>
ncipal office address <u>MUST BE A ST</u>	REET ADDRESS)	1
	·	
Enter new mailing address, if applic	able:	10
(Mailing address MAY BE A POST O	FFICE BOX)	/H
		(
		tt a ab
		<u>orida, enter the name of the </u>
		orida, enter the name of the
new registered agent and/or the new		orida, enter the name of the
		orida, enter the name of the
If amending the registered agent and new registered agent and/or the new Name of New Registered Agent	registered office address: N/A	
new registered agent and/or the new Name of New Registered Agent		s)
new registered agent and/or the new	registered office address: N/A	

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.

Example: X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>V</u>	JAMIE AGUIAR	1500 SE 10TH STREET FORT LAUDERDALE FL 33316
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) 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)
N/A

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(s) a	utention: 01/12/2012
Effective date <u>if applicable</u> :	1/12/2012
Effective date <u>it applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adby the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach 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)
	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder
Dated 1/12/2	2012
Signature	firector, president or other officer – if directors or officers have not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
	GUMA AGUIAR
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)