

Florida Department of State Division of Comporations

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Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

: (305) 534-3694 : (305)633-9696

Phone Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one smail address please. \*\* "

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN WE "R" FAMILY USA CORP.

Certificate of Status	0
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Help

Bank needs amendment

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January 20, 2010.

FLORIDA DEPARTMENT OF STATE
Division of Corporations

WE "R" FAMILY USA CORP. 2230 SW 131 CT. MIAMI, FL 33175

SUBJECT: WE "R" FAMILY USA CORP.

REF: P02000015961

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

PLEASE NOTE THAT THE CHANGES IN THE AMENDMENT WAS DONE ON THE ANNUAL REPORT THAT WAS FILED ON JANUARY 5, 2010.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6908.

Sylvia Gilbert Regulatory Specialist II

Letter Number: 510A00001478



P.O BOX 6327 - Tallahassee, Florida 32314

+100000010140
Articles of Amendment
IO Articles of Incorporation of
WE "FAMILY USA CORP- (Name of corporation as currently filed with the Florida Ogor, of State)
(reasse of corporation as currently mad with the righted Dept. of State)
Po2 0000 15961 ====================================
(Document number of corporation (if known)
(Document number of corporation (if known)  Pursuant to the provisions of section 607-1006, Florida Statutes, this Florida Profit Corporation 32 adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
DEICTE: ARTICLETT: REGISTERED AGRIT MERCEDES SUAREZ
DELETE: ARTICIE DT: OFFICER AND DIRECTOR
MERCEDES SUAREZ
ADD'S ARTICLE IV: REGISTERED AGENT
ENRIQUE J. MORAJES
ARTICLE TI : OFFICER AND DIRECTOR
ENRIQUE J. MORALES
(Attach additional pages if necessary)
If an amendment provides for 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 second secon
(continued)

La l	
The date of each amendment(s) adoption:	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were approved by the shareholders. The number of votes cast fittle amendment(s) by the shareholders was/were sufficient for approval.	`or
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval b	У
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	ion
☐ The amendment(s) was/were adopted by the incorporators without shareholder action a shareholder action was not required.	md
Signed this 7th day of January	
Signature  (By a director, president 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 appointed fiduciary by that fiduciary)	
MERCEDES SUAREZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

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## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

WE "R" FAMILY USA CORP .

(Name of Corporation)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTIMER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND IAM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

RECISIONED AGENT

ENRIGHE J. MOKALES

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