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DEC 16 2010

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	RPORATION: CORPO LINK INTERNATIONAL INC			
DOCUMENT NU	T NUMBER: P02000065941			
The enclosed Artic	cles of Amendment and	d fee are submitt	ed for filing.	
Please return all co	orrespondence concern	ing this matter to	the following:	
		HENRY (COSTA	
		Name of Con	act Person	
		Firm/ Co	mpany	
	210 SW 107 AVE			
Address				
	MIAMI FL 33174			
	ı	City/ State and	•	
	E-mail address: (to	be used for future	ol.com nnual report notification)	
For further informa	ation concerning this n	natter, please cal	:	
Namo	henry costa of Contact Person	at (Area Code & Daytime T	222-2289
	c for the following amo	ount made payab		
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	s Cer	.75 Filing Fee & tified Copy ditional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amer Divis Clifto 2661	t Address adment Section ion of Corporations on Building Executive Center Circhassee, FL 32301	cle

Articles of Amendment

to

Articles of Incorporation

of

ZOIO DEC 13 AMII: 11

ANDLAHASSEE. FLORIUR

CORPO LINK INTERNATIONAL INC.

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

P02000065941

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation	on: The new
name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associ	poration," "company," or "incorporated" or the Corp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	6791 NW 87 aro Mumi FC 33178
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	679/ NW 87 ave moams PZ 33178
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent: MARIA HER	NANDEZ
	NW 87 ave ida street address)
MIAMI (City)	, Florida <u>33178</u> (Zip Code)
I flatter AT	

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>VP</u>	MARIA HERNANDEZ	<u>5</u> 0%	6791 NW 87 av	XC . ☑ Add ☐ Remove
				
	ling or adding additional Artic			
provisio	nendment provides for an exchons for implementing the ameno ot applicable, indicate N/A)			

The date of each amendmen	t(s) adoption: 0	9/01/20	10
Effective date <u>if applicable</u> :	09/01/2010	(date	of adoption is required)
	(no more than !	90 days i	after amendment file date)
Adoption of Amendment(s)	(<u>C</u> 1	IECK C	DNE)
The amendment(s) was/we by the shareholders was/w			olders. The number of votes cast for the amendment(s) l.
			nolders through voting groups. The following statemen entitled to vote separately on the amendment(s):
"The number of votes	cast for the amer	idment(s) was/were sufficient for approval
by	(voting group)		,,,
	(voting group)		
The amendment(s) was/we action was not required.	ere adopted by the	board o	of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the	e incorpo	orators without shareholder action and shareholder
	dawalux a director, presid	ent or c	other officer – if directors or officers have not been
	ected, by an incorpointed fiduciary		- if in the hands of a receiver, trustee, or other court iduciary)
		MA	RIA HERNANDEZ
	(Ту	ped or p	rinted name of person signing)
		V	PRESIDENT
	(Title o	f person	signing)