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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: BLUE S	KY INTERNATION	NAL GROUP, CORP.	
DOCUMENT NUMBER	R:	P03000	004940	
The enclosed Articles of	Amendment and fee a	e submitted for filing.		
Please return all correspo	ondence concerning this	s matter to the followin	ng:	
	sc	RAYA VASQUEZ		
	N	ame of Contact Person		
		Firm/ Company		
401 NW 72 AVE APT 106				
Address				
MIAMI, FLORIDA 33126				
		ty/ State and Zip Code /asquez@att.net		
	E-mail address: (to be used	I for future annual report no	otification)	
For further information c	oncerning this matter,	please call:		
SORAYA	VASQUEZ	at (786)	218-4784	
Name of Con		Area Code &	Daytime Telephone Number	
Enclosed is a check for the	ne following amount m	ade payable to the Flor	rida Department of State:	
	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee Certified Copy (Additional copy is	&	
Mailing Address	S	Street Address		
Amendment Section		Amendment Section	on	
Division of Corporations		 Division of Corpo 	prations	
P.O. Box 6327		Clifton Building		
Tallahassee, FL 32314		2661 Executive Co	enter Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

BLUE SKY INTE	FNATIONAL GROUP, C	ORP
(Name of Corporation as cu	urrently filed with the Florida	Dept. of State)
f030000	4940	
(Document N	Number of Corporation (if know	n) 6
Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporation		ida Profit Corporation adopts the folia
A. If amending name, enter the new nam	e of the corporation:	
		The new
name must be distinguishable and conta abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "	the designation "Corp," "Inc,"	or "Co". A professional corporation
B. Enter new principal office address, if a		
(Principal office address <u>MUST BE A STR</u>	REET ADDRESS)	
		
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
D. If amending the registered agent and/onew registered agent and/or the new r		Florida, enter the name of the
Name of New Registered Agent:	Nilda Hernandez Moqui	llaza
	8422 SW 209 ST	
New Registered Office Address:	(Florida street add	dress)
	MIAMI	, Florida 33189
	(City)	(Zip Code)
No. 70 to 14 to 15	. •	•
New Registered Agent's Signature, if char I hereby accept the appointment as registere		accent the obligations of the position
	Wildo Hom	ionder
	Signature of New Registered A	lgent, if changing
		\mathcal{O}

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> </u>	SORAYA VASQUEZ	401 NW 72 AVE MIAMI FL 33126 US	
<u>P</u>	Nilda Hernandez Moquillaza	8422 SW 209 ST MIAMI, FLORIDA 33189	☑ Add □ Remove
<u>provisi</u>	mendment provides for an exchange, re ons for implementing the amendment in not applicable, indicate N/A)		
		// // // // // // // // // // // // //	

The date of each amendmen	t(s) adoption: 09	0/09/2008
	09/10/2008	(date of adoption is required)
,	(no more than 9	00 days after amendment file date)
Adoption of Amendment(s)	(СН	ECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes cast for the amendment(s) approval.
		the shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amen	dment(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 of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the	incorporators without shareholder action and shareholder
Dated_09/0	08/2010	
(B) sel	y a director, presid	Slagueze dent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)
	/**	SORAYA VASQUEZ
	(Ту	ped or printed name of person signing)
	·	PRESIDENT
	(Title o	f person signing)