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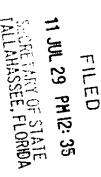
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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Tanica 7 mares @ yahoo- com:
-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐ \$52.50 Filing Fee **☐ \$43.75** Filing Fee & **\$43.75** Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section **Division of Corporations Division of Corporations**

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment to Articles of Incorporation

of

	3/N/ON) 1	NC.	JUL 20
(Name of Corporation as curre	ently fued with the Fiorida	Dept. of State)	15/100
(Document Num	nber of Corporation (if know	n)	1 JUL 29 METARY AHASSEE
Pursuant to the provisions of section 607.1006 mendment(s) to its Articles of Incorporation:	5, Florida Statutes, this <i>Flor</i>		
. If amending name, enter the new name of	the corporation:		
			The new
name must be distinguishable and contain to abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "proj	designation "Corp." "Inc,"	or "Co". A professional co	
Enter new principal office address, if appl	licable:		
Principal office address <u>MUST BE A STREE</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)			
D. If amending the registered agent and/or renew registered agent and/or the new regis		Florida, enter the name of th	<u>e</u>
Name of New Registered Agent:			
New Registered Office Address:	(Florida street add	dress)	
_	<u> </u>	, Florida	
	(City)	(Zip Code)	
lew Registered Agent's Signature, if changing		r ar in a ca	*.*
hereby accept the appointment as registered ag	gent. I am jamiliar with and	accept the obligations of the	position.
	ignature of New Registered A	facut if above in	

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>	<u>Address</u>	Type of Action
P	15A/AS PLATA	5634 S.W. 102A1 Miomi, Fl. 33165	Add Remove
2	HECTOR VARQUEZ	900 W. 49 5tr. Suite 505 Hislesh, 71. 330	_
		1	_
	nendment provides for an exchange, recl		
	ons for implementing the amendment if a ot applicable, indicate N/A)	iot contained in the amendment	nseir:
<u> </u>			
-			
- , 			

The date of each amendment(s) adoption: 07/24/201/
(date of adoption is required)
Effective date if applicable: 07 / 24 / 20 / / (no more than 90 days after amendment file date)
(no more than 90 days after amenament fite date)
Adoption of Amendment(s) (CHECK ONE)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statements to be separately provided for each 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)
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 07/24/2011
Signature Lesnande
(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)
(Typed or printed name of person signing)
(Typed or printed name of person signing)
(Title of person signing)
(Title of person signing)