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SECRETARY OF STATE
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COVER LETTER ,

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O: Amendment Section Division of Corporations
AME OF CORPORATION: KIKO DOLLAR STORE INC
OCUMENT NUMBER: P03000032453
he enclosed Articles of Amendment and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
ANA LILIAN LUCHA
Name of Contact Person
KIKO DOLLAR STORE INC
Firm/ Company
4700 NW 7TH STREET STE 14
Address
MIAMI, FL 33126
City/ State and Zip Code
FELIUTAX@YAHOO.COM
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
ANA LILIAN LUCHA at (786) 709 2716
Name of Contact Person Area Code & Daytime Telephone Number
nclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to rticles of Incorporation	FII -
of	12 NOV LED
	SECON 21 PHIN

KIKO DOLLAR STORE INC

(Name of Corporation as currently filed with the Florida Dept. of State ALLAHASSEE, FINATE P03000032453

nent(s) to

, 00000002 100			, FLODILE
(Documen	nt Number of Corporation	n (if known)	NUA
Pursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, tl	his <i>Florida Profit Corpo</i> d	ration adopts the following amend
. If amending name, enter the new na	ame of the corporation:		
ame must be distinguishable and con Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	nation "Corp," "Inc," o	r "Co". A professional	
. Enter new principal office address,	if annlicable:	N/A	
Principal office address <u>MUST BE A S</u>			
. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A	
(manning man ess) <u>man ess (man ess) (</u>	orrice Bore		
. If amending the registered agent an new registered agent and/or the new			the name of the
	ANA LILIAN L		
Name of New Registered Agent		STREET APT 1	
		street address)	129
New Registered Office Address:	MIAMI	·	, Florida 33176
	(C	ity)	(Zip Code)
lew Registered Agent's Signature, if c	hanging Registered Age	ant.	
hereby accept the appointment as regist			bligations of the position.
	affection of		
Si	gnature of New Registere	ed Agent, if changing	

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	<u>PT</u>	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	PT	ANA LILIAN LUCHA	9972 SW 88 ST #1129
X Add			MIAMI, FL 33176
Remove			
2) Change	PT	RAFAEL C TIRADO	4700 NW 7th ST # 14
Add			MIAMI, FL 33126
X 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 excha	ange, reclassification, or cancellation of issued shares,	
provisions for implementing the amen	ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
N/A		

The date of each amendment(s) ac	doption: 11/15/2012
	/15/2012
Effective date <u>ir applicable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statement 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)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated_11/14/	2012
Signature	Many 3
selecte	director, 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 atted fiduciary by that fiduciary)
	ANA LILIAN LUCHA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)