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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: ISANIC FISHER ISLAND, INC. DOCUMENT NUMBER: P03000070253 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following:				
		-		
	Paola Castillo Ril			
		Name of Contact Person	1	
Firm/ Company				
	999 Brickell Avenue, Penthouse 1101			
	Address			
	Miami, Florida 33	3131		
		City/ State and Zip Code	e	
mai	nager@isanichyu	ndai.com		
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Paola Castillo	Ribon	at (305	, 416-0202	
Name o	f Contact Person		de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divis	ing Address Indiment Section Ition of Corporations Box 6327	Amend Divisio	Address ment Section n of Corporations Building	

Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ISANIC FISHER ISLAND,	INC				
(Name of Corporation as cui		ida Dept. of State)		_	
P03000070253					
(Document N	umber of Corporation (if k	nown)			
Pursuant to the provisions of section 607.1000 its Articles of Incorporation:	6, Florida Statutes, this Flo	orida Profit Corporation add	opts the following	ng amendm	ent(s) to
A. If amending name, enter the new name	of the corporation:				
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	on "Corp," "Inc," or "Co	". A professional corporal	rated" or the a ion name must	The nevabbreviation contain the	n
B. Enter new principal office address, if an (Principal office address MUST BE A STRE				_	
C. Enter new mailing address, if applicab (Mailing address <u>MAY BE A POST OF</u>				- -	ਚੀ
D. If amending the registered agent and/or	r registered office addres:	s in Florida, enter the name	e of the	13 DEC	
new registered agent and/or the new re	gistered office address:			-2	
Name of New Registered Agent				7	발목
	(Florida street	address)		PH 111: 47	HIVE HVIS
New Registered Office Address:	(City)	, Florida	(Zip Code)		;
	(City)		(Lip Code)		
New Registered Agent's Signature, if chang I hereby accept the appointment as registered		and accept the obligations	of the position.		

Signature of New Registered 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	s	Paola Castillo Ribon	999 Brickell Avenue
Add			Penthouse 1101
Remove			Miami, Florida 33131
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ticles, enter change(s) here: (Be specific)
	
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	hange, reclassification, or cancellation of issued shares,
an amendment provides for an exch	hanges rectassification, or cancellation or issued shares,
rovisions for implementing the ame	endment if not contained in the amendment itself:
an amendment provides for an exch rovisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
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The date of each amendment(s) adoption: November 20, 2013	, if other than the
date this document was signed.	
Effective date if applicable: November 20, 2013	
(no more than 90 days after amendment file date)	_
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 statement must 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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated November 21, 2013	
Signature Shand (ole)	_
(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)	
Richard G. Toledo, Esq.	
(Typed or printed name of person signing)	
Authorized Representative	
(Title of person signing)	_