

451

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN ALL SERVICE & MAINTENANCE CORP.

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EMPIRE CORP KIT

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## Articles of Amendment to Articles of Incorporation of

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | E & MAINTENANCE COF                                                                               |                                               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|-----------------------------------------------|
| (Name of Corporation as curren                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | (State)                                                                                           |                                               |
| P03                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                   |                                               |
| (Document Num                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ber of Corporation (if known)                                                                     |                                               |
| Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:  A. If amending name, enter the new name of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                   | offic Corporation adopts the following        |
| W. II SUCHAINE HADE STEEL 199 DAW HAMIS AL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | the east boy Bellow.                                                                              |                                               |
| name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "profine make must contain the word "chartered," "profine address MUST BE A STREET (Mailing address MAY BE A POST OFFIC.  D. If amending the registered agent and/or reper registered agent and/or the new registered agent and/or the new registered agent and/or the new registered. | designation "Corp," "Ino," or "Consistent association," or the abbre    Cable:   FADDRESS         | o". A professional corporation viation "P.A." |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | CONTROL WILLIAM                                                                                   |                                               |
| Name of New Registered Avent:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                   | <del></del>                                   |
| New Registered Office Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | (Florida street address)                                                                          |                                               |
| •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                   | Florida                                       |
| New Registered Agent's Signature. If changing I hereby accept the appointment as registered agentials.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | (City)  Registered Agent: gent. I am familiar with and accept gnature of New Registered Agent, ij |                                               |

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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)

Title Name Address Type of Action

director Dine Monica Cordoba 9101 F Bay Harbor #306 [7] Add

| director                    | Dina Monica Cordoba                                                                           | 8101 E Bay Harbor #308<br>Bay Harbor Islanda FL 33154                     | _ ☑ Add<br>□ Remove                   |
|-----------------------------|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|---------------------------------------|
|                             |                                                                                               |                                                                           | Add Remove                            |
|                             |                                                                                               |                                                                           | Add Remove                            |
| E. If amendi<br>(aitach ada | ing or adding additional Articles, and ditional sheets, if necessary). (Be sp                 | ter change(s) here:<br>ec(fic)                                            |                                       |
|                             |                                                                                               |                                                                           |                                       |
|                             |                                                                                               |                                                                           |                                       |
|                             |                                                                                               |                                                                           |                                       |
| provision                   | endment provides for an exchange, no for implementing the amendment applicable, indicate N/A) | reclassification, or cancellation of is if not contained in the amendment | sued shares.<br>itself:               |
|                             |                                                                                               |                                                                           | · · · · · · · · · · · · · · · · · · · |
|                             |                                                                                               | -                                                                         |                                       |
|                             |                                                                                               |                                                                           |                                       |

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| The date of each amendment                         | (s) adoption: 04/05/2011                                                                                                                                                                                |
|----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Effective date if applicable:                      | 04/05/2011 (date of adoption is required)                                                                                                                                                               |
| Elibrate date i <u>i applicante</u> .              | (no more than 90 days after amendment file date)                                                                                                                                                        |
|                                                    | ·                                                                                                                                                                                                       |
| Adoption of Amendment(s)                           | (CHECK ONE)                                                                                                                                                                                             |
| The amendment(s) was/we by the shareholders was/we | re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.                                                                                              |
|                                                    | re approved by the shareholders through voting groups. The following statement ad 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                                                                                                                                              |
| Ъу                                                 | 31                                                                                                                                                                                                      |
|                                                    | (voting group)                                                                                                                                                                                          |
| The amendment(s) was/we action was not required.   | re adopted by the board of directors without shareholder action and shareholder                                                                                                                         |
| The amendment(s) was/we action was not required.   | re adopted by the incorporators without shareholder action and shareholder                                                                                                                              |
| Dated_04/0                                         | 5/2011                                                                                                                                                                                                  |
| M                                                  | X                                                                                                                                                                                                       |
| sole                                               | a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court cointed fiduciary by that fiduciary) |
|                                                    | Luis Aquije                                                                                                                                                                                             |
| •                                                  | (Typed or printed name of person signing)                                                                                                                                                               |
|                                                    | President                                                                                                                                                                                               |
|                                                    | (Title of person signing)                                                                                                                                                                               |

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