P03000/35306

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COVER LETTER

NAME OF CORPORATION: - PILERXX PAYS PROPERTIKES INC. P 03000135306 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sort THINTS CPA

Name of Contact Person

THOMAS & Co. CPA PA

Firm/Company

97/0 Stip/ing RJ # 10/

Address

CopperCty Ft. 33824

City/ State and Zip Code TODE CPA O STICPA · COM.

E-mail address: (to be used for future annual report notification) 111 For further information concerning this matter, please call: Name of Contact Person at (959) 435 7272.

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$\text{Certificate of Status}\$ □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Division of Corporations

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

Street Address

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

Articles of Amendment

to Articles of Incorporation

	Articles of Incorporation of		空气 7
PIERRE PAYS	PROPERTIA	En las	
(Name of Corporation as curren			一篇。何
P03000135	306 er of Corporation (if known)		
(Document Numb	er of Corporation (if known)		75
Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation:	orida Statutes, this <i>Florida Proj</i>	fit Corporation adopts	the following intendment(s) to
A. If amending name, enter the new name of t	he corporation:	4-	The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," of	Corp," "Inc," or "Co". A pro	ny," or "incorporated of ssional corporation	d" or the abbreviation
B. Enter new principal office address, if applie (Principal office address MUST BE A STREET			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u> </u>	N/I	-
D. If amending the registered agent and/or renew registered agent and/or the new regist Name of New Registered Agent		ida, enter the name of	<u>the</u>
New Registered Office Address:	(Florida street address) (City)	, Florida	(Zip Code)
	ent. I am familiar with and acc		the position.
Signature	of New Registered Agent, if cha	inging	

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	PT Joh	n Doe	
X Remove	<u>V</u> <u>Mik</u>	ce Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smìth	
Type of Action (Check One)	<u>Title</u>	Name	Address
1)Change Add Remove	P/S	ERVIN DEZVA	20115 HINHERWOZAKE BLUL NTREH MIAMI BECH FX. 33179
2) Change Add Remove	<u>VP</u>	ESTHER DELVA	20115 HIGHMAD LAKE BLUL NORTH MIAMI BETH FZ. 33178
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove		- · · · · · · · · · · · · · · · · · · ·	
6) Change Add Remove			

f amending or adding additional Art attach additional sheets, if necessary).	(Be specific)	<u>, , , , , , , , , , , , , , , , , , , </u>		
		 		
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f an amendment provides for an exc provisions for implementing the am	change, reclassific lendment if not co	ation, or cancel	lation of issued mendment itsel	shares, f:
(if not applicable, indicate N/A)				
<u> </u>		 	<u></u>	
				
			 	

The date of each amendment(s) ad	loption: 6/26/12
Affective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the sharcholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	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. The amendment(s) was/were add 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	26/12
selecte appoin	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted 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)