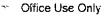
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

Claukafa	Dunnamian INI	•	
NAME OF CORPORATION: Claukafe	Properties live		
DOCUMENT NUMBER: P03000147	333		
The enclosed Articles of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this ma	tter to the following:		
Telmo Gorostia	aga		
	Name of Contact Persor	1	
Claukafe Prope	erties INC		
	Firm/ Company		
1000 NW 106	AVE		
	Address		
PLANTATION,	FL, 33322		
	City/ State and Zip Code	C	
mo_goros@msn.o	com		
	sed for future annual report	notification)	
	.vu .ou.u.u u.u.uv.po	,	
For further information concerning this matter, pleas	se call:		
Telmo Gorostiaga	054	5545837	
Telmo Gorostiaga	at (954		
Name of Contact Person	Arca Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depa	urtment of State:	
\$35 Filing Fee \$\text{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)	
Mailing Address		Address	
Amendment Section	Amendment Section		
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building			

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

Claukafe Properties INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P03000147333

. If amending name, enter the new na	me of the corporation:		
N/A			The
ame must be distinguishable and cont Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associat	ation "Corp," "Inc," or "Co".	A professional corpo	porated" or the abbreveration name must conta
. Enter new principal office address, i	f applicable:		
rincipal office address <u>MUST BE A ST</u>	TREET ADDRESS)		
			·
F-ton more modified a delicera (6 1)			
	rahla:		
(Mailing address MAY BE A POST C			
(Mailing address <u>MAY BE A POST (</u>		o Florida, enter the na	ume of the
(Mailing address <u>MAY BE A POST (</u>	OFFICE BOX) d/or registered office address in	n Florida, enter the na	ıme of the
(Mailing address MAY BE A POST () If amending the registered agent and new registered agent and/or the new	OFFICE BOX) d/or registered office address in	n Florida, enter the na	ume of the
(Mailing address MAY BE A POST (DFFICE BOX) d/or registered office address in registered office address:	n Florida, enter the na	ume of the
(Mailing address MAY BE A POST () If amending the registered agent and new registered agent and/or the new	d/or registered office address in registered office address: N/A		ime of the
. If amending the registered agent and new registered agent and/or the new	DFFICE BOX) d/or registered office address in registered office address:		ime of the
(Mailing address MAY BE A POST (d/or registered office address in registered office address: N/A		- -

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: \underline{X} Change \underline{P}'	<u>T</u> <u>Joh</u>	n Doe	
X Remove V	<u>Mik</u>	ce Jones	
X Add S	V <u>Sall</u>	y Smith	
Type of Action (Check One)	<u> Fitle</u>	<u>Name</u>	<u>Addres</u> s
	/	Claudio Gorostiaga	1000 NW 106 AVE
Add			PLANTATION
Remove			FL. 33322
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>I</u> 1	amending or adding additional Articles, enter change(s) here: attach additional sheets, if necessary). (Be specific)
v/A	
. <u>If</u>	an amendment provides for an exchange, reclassification, or cancellation of issued shares,
I	provisions for implementing the amendment if not contained in the amendment itself:
N/A	(if not applicable, indicate N/A)

, j.

The date of each amendment(s) adoption: N/A	, if other than the
date this document was signed.	
Effective date if applicable: N/A	
(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)	
(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_12/4/2014	
Signature Telmo Gorostiaga	
(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)	
Telmo Gorostiaga	
(Typed or printed name of person signing)	
President	
(Title of person signing)	