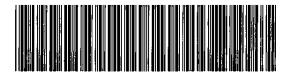
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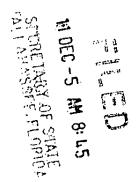
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Amend. 12/8/11

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MACLIN POWE	R. INC.	
DOCUMENT NUMB	ER: <u>P04000038280</u>		
The enclosed Articles of	of Amendment and fee are su	abmitted for filing.	
Please return all corresp	pondence concerning this ma	atter to the following:	
		OITH DAL FARRA, CPA	
	N	ame of Contact Person	
		Firm/ Company	······································
		1465 NW 97 AVE	
		Address	
		DORAL, FL 33172 ity/ State and Zip Code	
	DA E-mail address: (to be u	ALFARRAJ@AOL.COM sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
JUDITH DA	AL FARRA, CPA) 591-8787
Name of	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
	ng Address dment Section		Address ment Section

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 Articles of Incorporation of

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l" or the poration
ode)
osition.

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)		<u>Name</u>		Address
1) <u>P</u>		MARCO FERRARI	-	1465 NW 97 AVE DORAL, FL 33172
2) <u>VP</u>		ELENA V PARDO	_	1465 NW 97 AVE DORAL, FL 33172
3)			_	
4)			_	
5)			_	
6)		 	_	
<u>If REMOVING</u>	an office	r and/or director, please list the t	title(s) and	name of the officer/director to be removed:
Title(s)	<u>Name</u>		Title(s)	<u>Name</u>
1) <u>P</u>	MAUR	O COGOLI	4)	
2)		· · · · · · · · · · · · · · · · · · ·	5)	
3)			6)	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
(attach additional sheets, if necessary).	(Be specific)	N/A				
			•			
						
		·····				
	<u></u>					

F.	If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
	A/A
The	e date of each amendment(s) adoption: NOVEMBER 1, 2011
Eff	ective date if applicable: NOVEMBER 1, 2011
	(no more than 90 days after amendment file date)
Ad	option of Amendment(s) (CHECK ONE)
<u>()</u>	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.
	by the shareholders was were surnerent 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
	Dateu
	Signature Marco Toron
	(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)
	MARCO FERRARI
	(Typed or printed name of person signing)
	PRESIDENT (Title of person signing)
	(True of person signing)