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# **COVER LETTER**

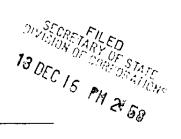
TO: Amendment Sec Division of Corp			
NAME OF CORPO	RATION: LA RURAL	. CORP	
DOCUMENT NUM	DOMODOGEO4		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	EDUARDO OTO	OLE	
	,	Name of Contact Person	1
	LA RURAL COR	P	
		Firm/ Company	
	2346 WESTON F	ROAD	
		Address	
	WESTON, FL 33	326 ·	
		City/ State and Zip Cod	e
M	MARTINEZ@TOT	ALCORPCONS	ULTANTS COM
	_	sed for future annual report	
For further information	on concerning this matter, pleas	se call:	
EDUARDO (	OTOOLE	at (305	796-6124
Name	of Contact Person	at ( Area Co	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	ertment 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)
	iling Address		Address
Amendment Section Division of Corporations		Amendment Section Division of Corporations	
P.O. Box 6327		Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

### Articles of Amendment to Articles of Incorporation of

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



## LA RURAL CORP.

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address: , Florida

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with 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 <math>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 Doc			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Nar</u>	<u>ne</u>	<u>Addres</u> s	
1) Change	D	<u>O'</u>	TOOLE, EDUARDO P	1870 NE 207 ST	
Add				MIAMI, FL 33179	
Remove					
2) Change		_			
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add				,	
Remove					
5) Change					
Add					
Remove					
6) Change					
	_,	_			
Remove					

(Attach additional sheets, if necessary). (Be specific)  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)	. If amending or adding additional Arti	icles, enter change(s) here:
provisions for implementing the amendment if not contained in the amendment itself:	(Attach additional sheets, if necessary).	(Be specific)
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(if not applicable, indicate N/A)	. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
	(if not applicable, indicate N/A)	nument is not contained in the amendment user.
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The date of each amendment(s) adoption: 12/10/2013	, if other than the
date this document was signed.	
Effective date if applicable: 12/10/2013	
(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 east 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_12/10/2013	
Dated_12/10/2010	
Signature Milliant O. ooo	
(By a director, president or other officer 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)	
O'TOOLE, EDUARDO	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	