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| (Re | questor's Name) | |
|-------------------------|-------------------|-----------------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | ; #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only

Amend 10 9.18.07



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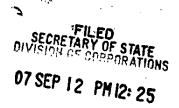
COVER LETTER

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TO: Amendment Section Division of Corporations

| NAME OF CORP | ORATION: ONYX ACC | COUNTING SERVI | CES, INC. | · |
|---|--|---|--|---|
| DOCUMENT NU | MBER:P04000162656 | | | |
| The enclosed Artic | les of Amendment and fee a | re submitted for filir | ıg. | |
| Please return all co | rrespondence concerning thi | s matter to the follow | wing: | |
| | ANGEL | A ADARRAGA | | |
| . | (Name | of Contact Person) | , <u></u> | |
| | | • | | ······································ |
| | (Fi | rm/ Company) | | |
| | | SW 80TH ST | | |
| | | (Address) | | |
| | | MI, FL 33193 tate and Zip Code) | | |
| For further informa | ation concerning this matter, | • , | | |
| ANGELA ADARR | | at (<u>305</u> | 496-8523 | |
| | e of Contact Person) | (Area Cod | e & Daytime T | 'elephone Number) |
| Enclosed is a check | for the following amount: | | | |
| ☑ \$35 Filing Fee | \$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing F Certified Copy (Additional copenclosed) | | □ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Ac Amendmen Division of P.O. Box 63 Tallahassee | t Section Corporations 327 | Street Address Amendment Se Division of Co Clifton Buildin 2661 Executive Tallahassee, FI | ection rporations g c Center Circ | ele |

Articles of Amendment to **Articles of Incorporation** of



ONYX ACCOUNTING SERVICES, INC.

| (Name of corporation as | currently filed with the | e Florida Dept. | of State) |
|-------------------------|--------------------------|-----------------|-----------|

| (Name of corporation as currently filed with the Florida Dept. of State) |
|--|
| P04000162656 |
| (Document number of corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation: |
| NEW CORPORATE NAME (if changing): |
| (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") |
| AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) |
| ADD: CAROLA LOZANO, VICE PRESIDENT |
| 14750 SW 80TH STREET |
| MIAMI, FL 33193 |
| |
| |
| · |
| |
| |
| |
| |
| (Attach additional pages if necessary) |
| If an amendment provides for 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 |
| |
| |
| |

(continued)

| The date of each amendmen | nt(s) adoption: 09/11/2007 |
|-------------------------------|--|
| Effective date if applicable: | |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| ` |) was/were approved by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval. |
| |) was/were approved by the shareholders through voting groups. The nt must be separately provided for each voting group entitled to vote amendment(s): |
| "The number of | of votes cast for the amendment(s) was/were sufficient for approval by |
| | (voting group) |
| ` |) was/were adopted by the board of directors without shareholder action ction was not required. |
| |) was/were adopted by the incorporators without shareholder action and was not required. |
| sele | director, president or other officer - if directors or officers have not been octed, by an incorporator - if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) |
| | ANGELA ADARRAGA |
| | (Typed or printed name of person signing) |
| | PRESIDENT |
| - | (Title of person signing) |

FILING FEE: \$35