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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: MOLLINEDO EI	NTERPRISES INC			
DOCUMENT NUM	BER: P05000052088				
The enclosed Articles	s of Amendment and fee are su	abmitted for filing.			
Please return all corre	espondence concerning this ma	atter to the following:			
	Caridad Garcia				
	-	Name of Contact Perso	n		
	Mollinedo Enterprises Inc.				
		Firm/ Company			
	1941 Dean Road				
		Address			
	Jacksonville FL 32216				
		City/ State and Zip Cod	e		
cario	dad1968@aol.com			. 1	
	E-mail address: (to be us	sed for future annual report	notification)	<u> </u>	ĿŖ.
				>>	C Z
For further information	on concerning this matter, pleas	se call:		. 글 PR 1	-
C. Garcia		904 at (725-6784	19 APR 11 PM 4:	
Name	of Contact Person	\	de & Daytime Telephone Number	_ _	ے _
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:	17	15 (A) OF 15 (B) 15 (B)
\$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)	ţ	1-
Am Div	iling Address endment Section rision of Corporations D. Box 6327	Ameno Divisio	Address Iment Section on of Corporations Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MOLLINEDO ENTERPRISES INC

(Name of Corporatio	on as currently filed with the Florid	a Dept. of State)
P05000052088		
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida its Articles of Incorporation:	Statutes, this Florida Profit Corpora	tion adopts the following amendment(s) to
A. If amending name, enter the new name of the con	rporation:	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the a	" "Inc," or "Co". A professional c	
B. Enter new principal office address, if applicable:	<u>.</u>	
(Principal office address <u>MUST BE A STREET ADD</u>	RESS)	
	-	
	 ·	
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u> </u>	
		<u>고</u> 등등
D. If amending the registered agent and/or registere	ed office address in Florida, enter th	as name of the
new registered agent and/or the new registered o		to name of the
Name of New Registered Agent		
		
	(Florida street address)	
New Registered Office Address:		. Florida
	(City)	(Zip Code)
Nov. Degistered Agentle Signature if shanging Degi	geowed Anome.	
New Registered Agent's Signature, if changing Regist the appointment as registered agent. I		gations of the position.
Siona	sture of New Registered Agent, if chan	<u> </u>

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) XX Change	<u>s</u>	Cruz, Yaney	10810 Garden Street
Add			Jacksonville FL 32219
Remove			Jacksonville FC 52219
2) Change	<u>P</u>	Garcia, Caridad	823 Nighthingale Rd
Add			
Remove			Jacksonville FL 32216
3) Change			_
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			-
Add			 .
Remove			
6) Change			<u> </u>
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
-		
-		
. <u></u> .		
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and an analysis in the amendment itself:	
(if not applicable, indicate N/A)		

The date of each amendment(s) and the state of each amendment was signed.	ioption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file da	nte)
Note: If the date inserted in this blocument's effective date on the De	lock does not meet the applicable statutory filing requirement partment of State's records.	ents, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the afficient for approval.	mendment(s)
	roved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendm	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder action actions action a	
selecte	irector, president or other officer – if directors or officers have do by an incorporator – if in the hands of a receiver, trustee, of the fiduciary by that fiduciary) Carlor (Typed or printed name of person signing) (Title of person signing)	