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### COVER LETTER

**TO:** Amendment Section Division of Corporations

			1	
NAME OF CO	RPORATION:CO	STA	SPRINGS, INC.	
DOCUMENT	NUMBER: P050	000	89162	<u> </u>
The enclosed A	rticles of Amendment and	fee are	submitted for filing.	
Please return all	correspondence concerni	ng this n	natter to the following:	
_	GIULI	ANA	DAVILA	<u> </u>
	(1	Vame of C	Contact Person)	
	Costa	SPR	ings, inc.	
_		(Firm/	Company)	<del></del>
_	1041	REI	BIRD AVE.	<u> </u>
		(Ad	idress)	
	MIAM	SP	RINGS, FL 331	66
_	((	City/ State	and Zip Code)	
For further info	rmation concerning this ma	atter, ple	ease call:	
GIULIAN	JA DAVILA		at (305_) 885-	-0424
(N	ame of Contact Person)		(Area Code & Daytime	Telephone Number)
Enclosed is a ch	eck for the following amo	unt:		
\$35 Filing Fee	S43.75 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)
Amenda Division P.O. Bo	Address nent Section of Corporations x 6327 see, FL 32314	->	➤ Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circ	ele

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of COSTA SPRINGS, INC. (Name of corporation as currently filed with the Florida Dept. of State) POSOOOO 89162

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

(Document number of corporation (if known)

# 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) ARTICLE III: AMEND AS PER ATTACHED EXHIBIT A (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)

### **EXHIBIT "A"**

### COSTA SPRINGS, INC. DOCUMENT NUMBER: <u>P05000089162</u>

### ARTICLE VII

### Delete the following Officers:

Title: P MARISOL QUIJANO 1031 REDBIRD AVENUE MIAMI SPRINGS, FL 33166 Title: TR/S MARIO A. DAVILA 1031 REDBIRD AVENUE MIAMI SPRINGS, FL 33166

Title: VP GLORIA QUIJANO 1031 REDBIRD AVENUE MIAMI SPRINGS, FL 33166

### Add the following Officers:

Title: P GIULIANA DAVILA 1041 REDBIRD AVENUE MIAMI SPRINGS, FL 33166

Title: VP NORMAN CRAAN 1041 REDBIRD AVENUE MIAMI SPRINGS, FL 33166

Title: VP MARISOL QUIJANO 1041 REDBIRD AVENUE MIAMI SPRINGS, FL 33166 Title: VP MARIO A. DAVILA 1041 REDBIRD AVENUE MIAMI SPRINGS, FL 33166

Title: TR/S GLORIA QUIJANO 1041 REDBIRD AVENUE MIAMI SPRINGS, FL 33166

The date of each amendment(s) adoption: JAN. 19, 2006
The date of each amendment(s) adoption:  JAN. 19, 2006  Effective date if applicable:  (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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)
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 are shareholder action was not required.
Signature  (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)
GIULIANA DAVILA
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

FILING FEE: \$35