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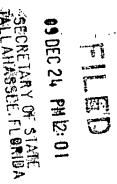
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C.COULLIETTE
DEC 3 0 2009

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION:	IMIER Investmen	ts INC.
DOCUMENT NUMBER:	05000 113161	
The enclosed Articles of Amendment and fee a	re submitted for filing.	
Please return all correspondence concerning thi	s matter to the following:	
N	uis A. Reyes ame of Contact Person	
L	IMIER Investme	ents INC.
<u>8515 SW</u>	152 nd Ave #	284
- Miai	Mi, FC 33193 ity/ State and Zip Code	
E-mail address: (to be used	UNICATIVES+Men- d for future annual report notification)	ts.com
For further information concerning this matter,	please call:	
Name of Contact Person	at (784) 553 Area Code & Daytime Tele	a443 phone Number
Enclosed is a check for the following amount m	ade payable to the Florida Departr	ment of State:
\$35 Filing Fee \$\times \text{Certificate of Status}\$	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

Lumien Investi	nents Inc.	
(Name of Corporation as currently filed with t)
· P05000/13/6/		
(Document Number of Corporation	on (if known)	
· ·		
Pursuant to the provisions of section 607.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Profit Col</i>	rporation adopts the following
A. If amending name, enter the new name of the corporation	<u>:</u>	
NIA		The new
name must be distinguishable and contain the word "corporable abbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associa	rp," "Inc," or "Co". A	"incorporated" or the professional corporation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	CG ST T
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office	N/A N/A nddress in Florida, enter	the name of the
new registered agent and/or the new registered office add		
Name of New Registered Agent: A L	xis Rujes	
New Registered Office Address: (Florid) 152 AVI # 28Y la street address)	, Florido 33/93
(City)	l'anui (Zip C	Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famil	<u>ent:</u>	ligations of the position.

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)

<u>Title</u>	<u>Name</u>	<u>Add</u>	ress	Type of Action
<u>vs</u> 0.	MixiAN PAU	01N 85/ #2	5 8W 152 Apre 284 Miami Fl 33193	Add Remove
<u>D.</u>	Alexis Rey	化5 86	5 SW 152 AVR 284 Miáni Fl 33193	Add Remove
				Add Remove
	or adding additional A		(s) here:	
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				<u> </u>
provisions f			tion, or cancellation of issained in the amendment	
Mil	IAN PADIN	Cancelation	n of Shaves.	Ø
	xis Reyes		shares	

The date of each amendment(s) ac	doption:
	(date of adoption is required)
Effective date <u>if applicable</u> :	more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adby the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast t	for the amendment(s) was/were sufficient for approval
by	ing group)
(voti	ing group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
action was not required.	opied by the mediporators without shareholder delitor and shareholder
Dated	12/9/09
selected,	rector, president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)
/	(Typed or printed name of person signing)
	(Title of person signing)