POUDDOOPZDY

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
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1) mend (1011.12.13

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: PEDELTA INC DOCUMENT NUMBER: P0600009204 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JORDI R TORRENTS Name of Contact Person JORDI R TORRENTS PA Firm/ Company 2655 LE JEUNE ROAD SUITE 804 Address CORAL GABLES FL 33134 City/ State and Zip Code JORDI.TORRENTS@TORRENTSLAW.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at $(\frac{305}{\text{Area Code & Daytime Telephone Number}})$ JORDI R TORRENTS Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment to Articles of Incorporation of



	of		1 / / 2 ·
PEDELTA INC			_ Ala
(Name of Corporation as	currently filed with the Florida De	ept. of State)	
P06000009204			
(Documen	t Number of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida P</i>	Profit Corporation adopts the follow	ving amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
			The new
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered." "professional associa	ation "Corp," "Inc," or "Co". A	pany," or "incorporated" or the professional corporation name mus	abbreviation st contain the
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>			_
			<u> </u>
			
C. Enter new mailing address, if appli	cable:		
(Mailing address MAY BE A POST)	OFFICE BOX)		 -
			
D. If amending the registered agent an new registered agent and/or the new		orida, enter the name of the	
Name of New Registered Agent	JORDI R TORRENTS	}	
Hume of New Registered Agent	2655 LE JEUNE ROAL	O SUITE 804	
	(Florida street addres		
New Registered Office Address:	CORAL GABLES	, Florida 33134	
New Registered Office Address.	(City)	(Zip Code)	<u> </u>
New Registered Agent's Signature, if c I hereby accept the appointment as regist		accept the obligations of the position	n.
Si	gnature of New Registered Agent. if o	changing	
		- W	
	′ /		

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> <u>Jol</u>	hn Doe	
X Remove	<u>V</u> <u>M</u> i	ke Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	DVPS	TULIO A. REVOLLO	14241 N.W. 23RD ST
Add			PEMBROKE PINES
Remove			FL 33028
2) Change	DVP	FRANCISCO J. JORDAN	2000 Ponce Leon Blv # 608
Add			CORAL GABLES
Remove			FL 33134
3) Change	DPTS	JUAN A. SOBRINO	2000 Ponce Leon Blv # 608
Add			CORAL GABLES
Remove			FL 33134
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Art. ttach additional sheets, if necessary)	. (Be specif	îc)			
-					
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					_
an amendment provides for an exc rovisions for implementing the am	hange, reciss	isification, or o	cancellation of	issued shares.	ı
(if not applicable, indicate N/A)	CHOINCIL II II	ot contained in	i the amenume	ent teserr	
,					
					
					

The date of each amendment(s) adoption: October 25, 2013	, if other than the
date this document was signed.	
Effective date if applicable: AT FILING	
(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 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)	
(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_OCTOBER 25, 2013	
Signature	
(By a director, president or other officer – indirectors of officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
JUAN A SOBRINO	
(Typed or printed name of person signing)	
DIRECTOR - PRESIDENT	
(Title of person signing)	