P06000014129

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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE OF CORPORATIONS

Amund/cc/cus

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	_{ATION:} 11400 SW	95 AVE, CORP	
DOCUMENT NUMB	_{ER:} <u>P0600001412</u>		
	of Amendment and fee are su		
Please return all corres	pondence concerning this ma	tter to the following:	
	ALEJANDRO NU	JNEZ	
-		Name of Contact Person	1
-		Firm/ Company	
-	1450 NW 87TH <i>A</i>	AVENUE	
	DORAL, FL 3317	Address	
-		City/ State and Zip Cod	e
305	-663-5100		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
ALEJANDRO	NUNEZ	at (305	, 663-5100
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
□ \$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)
Ame Divis P.O.	ing Address adment Section tion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation

114DD SW 95 Ave, COD	
(Name of Corporation as currently filed with the Florida Dept. of State)	_
PD4DDDD14129	
(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 its Articles of Incorporation:	ng amendment(s) to
A. If amending name, enter the new name of the corporation:	
	_The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the a "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	_
	-
	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3 00 3 00 3 00 3 00 3 00
maining dualess <u>man 1 BB AT 05T 01 FEB BOA</u>	- C
	- 55
	- 14 CM
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	7. A.
Name of New Registered Agent	-
(Florida street address)	
New Registered Office Address:, Florida	_
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Signature of New Registered Agent, if changing	

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	NUNEZ, LOURDES	11490 SW 95 AVE
Add			MIAMI, FL 33176
Remove			
2) Change	Р	NUNEZ, CARLOS	1551 BIRD ROAD
Add			CORAL GABLES, FL33146
Remove			
3) Change	VP	NUNEZ, ALEJANDRO	1450 NW 87TH AVENUE
Add	-		SUITE 210
Remove			DORAL, FL 33172
4) Change			
Add			**************************************
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
,, , , , , , , , , , , , , , , , , , ,	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(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"	
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 and shareholder action was not required.	
Dated 10/23/2013 Signature Jandes / Luw	_
(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)	
LOURDES NUNEZ	_
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)