P06000033392

| (Re | equestor's Name) | |
|-------------------------|--------------------|---------------|
| (Ad | dress) | |
| (Ad | dress) | - |
| (Cit | ry/State/Zip/Phone | - →#) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE

ALLAHASSEE, FLORIBA

Amendment 10/04/06 Dc

COVER LETTER

TO: Amendment Section
Division of Corporations

| AME OF CORPORATION: Complete Kitchen Care, Inc. | | | | | |
|--|---|--|--|--|--|
| DOCUMENT NUMBER: | P06000033392 | | | | |
| The enclosed Articles of Amendme | ut and fee are submitted for filing. | | | | |
| Please return all correspondence co | cerning this matter to the following: | | | | |
| M | chael William Cathcart / Officer | | | | |
| | (Name of Contact Person) | | | | |
| Co | nplete Kitchen Care, Inc. | | | | |
| | (Firm/ Company) | | | | |
| | 10450 SW 198th Street | | | | |
| | (Address) | | | | |
| | Manual El Coder | | | | |
| | Miami, Fl. 33157 (City/ State and Zip Code) | | | | |
| For further information concerning | • | | | | |
| Michael William Cathcart | at (305) 254-8418 | | | | |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) | | | | |
| Enclosed is a check for the following | g amount: | | | | |
| \$35 Filing Fee \$43.75 Filing Certificate o | | | | | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | | | |

Articles of Amendment to Articles of Incorporation of

Complete Kitchen Care, Inc.

| | £ | P06000033392 | | |
|---------------------------------------|--|---|---|---|
| - | | ent number of corpor | ration (if known) | |
| adopts the follo | provisions of section 60 owing amendment(s) to i | 7.1006, Florida S its Articles of Inco | tatutes, this <i>Florida P</i> | rofit Corporation |
| | | | | |
| | word "corporation," "compar orporation must contain the w | | | |
| - | | | | - |
| | TS ADOPTED- (OTH) Title(s) being amended, | | | e Article Number(s) |
| | | added of defeted. | (BE BILCHIC) | |
| Article #V | OFFICER | | | |
| Adding: | Jose Angel Argue | eta | | , and the same of |
| | 8935 SW 41st T | етасе | | SE OS |
| | Miami, Fl. 33165 | | | OCT AND |
| · · · · · · · · · · · · · · · · · · · | Title: Officer | | · · · · · · · · · · · · · · · · · · · | SSER SSER |
| | | -11-11-11-11-11-11-11-11-11-11-11-11-11 | | F S |
| Autiala # B | | | water to the same the same to | 一言 |
| Article # I | <u> </u> | | | |
| Increase si | nare amount to: | 100 shares | of stock | |
| | | | | |
| | (Att | tach additional pages | if necessary) | |
| | ent provides for exchangeing the amendment if not | | | |
| | | | | - |
| | | | | |

(continued)

| The date of each amendment(s) adoption: September 28, 2006 |
|--|
| Effective date if applicable: October 5, 2006 (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) (<u>CHECK ONE</u>) |
| 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 and shareholder action was not required. |
| Signature Mich I Catho |
| (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) |
| Michael William Cathcart |
| (Typed or printed name of person signing) |
| Officer |
| (Title of person signing) |

FILING FEE: \$35