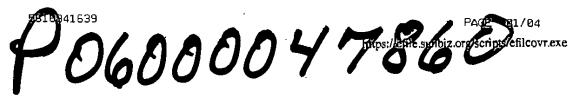
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Division of Corporations



Florida Department of State

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Account Number : 110432003053

Phone

: (561)694-8107

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COR AMND/RESTATE/CORRECT OR O/D RESIGN

SALEMCORP INVESTMENT CORP.



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Articles of Amendment

•	to Articles of Inc of	orporation		SECRE SECRE
SALEMCORP INVESTMENT CORP.				
(Name of Cornoration as curr	ently filed with	the Florida Dept	of State)	700 3
P06	000047860			77
(Document Nur	nber of Corporat	ion (if known)		95 -
Pursuant to the provisions of section 607,100 smendment(s) to its Articles of Incorporation:	6, Florida Statut	tes, this <i>Florida</i>)	Profit Corporation s	idopis the followi
A. If amending pame, enter the new name of	the corporation	<u>n:</u>		
				The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered." "pro	designation "C.	orp," "Inc," or "	Co". A professiona	uted" or the Il corporation
B. Enter new principal office address, if app (Principal office address MUST BE A STREE	licable:	1000 Brickell	Avenue	
(x randym typics muress intog be A VXXXXX	<u> </u>	Suite 215	·	
		Miami, Florida	33131	····
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFIC		1000 Brickell A	Vénue	•···
		Suite 215	20101	******
		Miami, Florida	33131	_
 If amending the registered agent and/or re new registered agent and/or the new registered. 	gistered office : tered office add	address in Piorid ress:	s, enter the name of	<u>Ctho</u>
Name of New Registered Agent:	Corporate Ma	intenance Serv	ces, LLC	
New Registered Office Address:		Avenue, Suite : la street address)	215	
<u> </u>	/liaml	<u> </u>	Florida_331	131
	(City)		(Zip Code)	
New Registered Agent's Signature, If changing I hereby accept the appointment as registered ag			The obligations of t	h e position.
Sig	nature of New R	legistered Agent, i	schanging	

Page 1 of 3

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If aptendin	g the Officers	and/or Direc	tors, enter t	<u>e title and</u>	<u>name of each</u>	officer/director bein
removed at	d title, name	and address	of each Offi	er and/or l	Olrector being	z added:
	itional sheets.			_		

<u>Title</u>	Name	Address	Type of Action
<u></u>	Mauriclo A. Salem	2855 LeJeuna Boad Suite 507 Coral Sables, Ft. 33134	Add Remove
<u>D</u>	Regina de Salem	2655 Le loune Road Suite 507 Coral Gables, Fl. 33134	
D	Maria Jarrin	1000 Brickell Avenue Suite 215 Miami, Florida 33131	[] Add [] Remove
E. If amend (attach at	ling of adding additional Art iditional sheets, if necessary).	icics, enter change(s) here: (Be specific)	
provisio	nendment provides for an exc as for implementing the sme at applicable, Indicate N/A)	hange, reclassification, or cancellation of adment if not contained in the amendmen	: <u>faued s</u> hares, n <u>t itself:</u>

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The date of each amendmen	t(s) adoption:	July 2, 2009
Effective date if applicable:	July 2, 2009	(date of adoption is required)
	(no more than 9	O days Aster amenament file date)
Adoption of Amendment(s)	(CH	ECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes east for the amendment(supproval.
		e shareholders through voting groups. The following statemen group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amend	iment(s) was/were sufficient for approval
by	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the	board of directors without shareholder action and shareholder
action was not required. Dated_July	2009	incorporators without shareholder action and shareholder
Signature	a director, preside	Y
sele		orator - if in the hands of a receiver, trustee, or other court
		MAURICIO SALEM
	(Турс	ed or printed name of person signing)
		DIRECTOR
	(Title of	person signing)