P06000057267

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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: Esquema Inc DOCUMENT NUMBER: P06000057267 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Henry Hoyos Name of Contact Person Esquema Inc Firm/ Company 922 SW 178 Way Address Pembroke Pines, FL 33029 City/ State and Zip Code henry@esquemainc.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954) 7096640

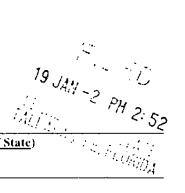
Area Code & Daytime Telephone Number Henry Hoyos Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Esquema, Inc.

(<u>Name o</u>	of Corporation as curre	ntly filed with the Florida	a Dept. of State)	
P06000057267				S. A. Chille
	(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corpora	tion adopts the following	ing amendment(s) to
A. If amending name, enter the new na	ime of the corporation:			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp." "Inc." or	"Co". A professional e		abbreviation
B. Enter new principal office address, if applicable:		N/A		
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)			
				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	·	
				
D. If amending the registered agent an new registered agent and/or the new			ne name of the	
Name of New Registered Agent	N/A			_
	(Florida	street address)		
New Registered Office Address:	N/A		, Florida	
The state of the s	· · · · ·	(City)		p Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist			gations of the position	ı.
	Signature of Nev	v Registered Agent, if char	 Iging	_

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:		LL S	6
X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	2 P
Type of Action (Check One)	Title	<u>Name</u>	Address 14930 S Biscayne River Dr.
1) Change	VP	Hector Ricardo Argarate	14930 S Biscayne River Dr.
Add			Miami Shores, FL 33168
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	 		
Add			
Remove			<u></u>
5) Change			
Add			
Remove			
) Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here:	19 JAN -2 PH 2:5
(Attach additional sheets, if necessary). (Be specific)	JAN -2
//A	13 PH 2:5
	- 13 17 2 5 - 14 14 14 14 14 14 14 14 14 14 14 14 14
	Links
	
	
	
. If an amendment provides for an exchange, reclassification, or cancellation of	
provisions for implementing the amendment if not contained in the amendment	ent itself:
(if not applicable, indicate N/A)	
NA	
	–
	

The date of each amendment(s) adoption:	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records. 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	er than the
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(By a director, president or wher officer—if directors or officers have not been selected, by an incorporator—if in the hands of a receiver, trustee, or other court	
(By a director, president or wher officer—if directors or officers have not been selected, by an incorporator—if in the hands of a receiver, trustee, or other court	
Henry Hoyos	
(Typed or printed name of person signing)	_
CEO/Registered Agent	

(Title of person signing)