060000 90382

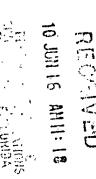
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EXAMINER

AMM: Te rest Roman.	
Huso Peros	
Requester's Name	
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2775 CATHEBRAL Drive LUT Address	<u>477.</u>
TALLAHASSEL FT. 32310	
City/State/Zip Phone #	
· •	
	Office Use Only
CORPORATION NAME(S) & DOCUMEN	NT NUMBER(S), (if known):
•	
1. SANTIAN CONSTRUCTION.	Fig.
(Corporation Name)	(Document #)
	•
2.	(Document #)
(Corporation Name)	(Document #)
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3. (Corporation Name)	(Document #)
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<i>A</i>	·
(Corporation Name)	(Document #)
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Walk in Pick up time 2.0	Certified Copy
Mail out Will wait	Photocopy Certificate of Status
NEW FILINGS	AMENDMENTS
Profit Not for Profit	Amendment Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger .
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report	Foreign
Fictitious Name	Limited Partnership
Troutious (value	Reinstatement
	Trademark
Į	Other
	Examiner's Initials
CR2E031(7/97)	

Articles of Amendment to Articles of Incorporation of

SANTIAGO CON			
(Name of Corporation as currently fi	led with the Florida	Dept. of State)	
P0600090382			, '
(Document Number of	Corporation (if know	vn)	
ursuant to the provisions of section 607.1006, Flor mendment(s) to its Articles of Incorporation:	ida Statutes, this Fla	orida Profit Corporatio	n adopts the following
. If amending name, enter the new name of the co	rporation:	•	
		1	The new
ame must be distinguishable and contain the wo bbreviation "Corp.," "Inc.," or Co.," or the design ame must contain the word "chartered," "profession	ation "Corp," "Inc,	" or "Co". A professi	
. Enter new principal office address, if applicable	:	:	**************************************
Principal office address <u>MUST BE A STREET AD</u> L			一
		•	TO JUN T
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	(X)	:	PX
Name of New Registered Agent: New Registered Office Address:			ae of the
	·	minida	
	(City)	, Florida_ <i>(Zip Code)</i>	
lew Registered Agent's Signature, if changing Reg	, ,,		
hereby accept the appointment as registered agent.		nd accept the obligation	s of the position.
		•	
	ra of Nau Pagistawad		

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)

<u>Title</u>	Name	Address	Type of Action
VP	PEREZ HUGO	2775 CATHEDRAL DRI	VR 407 291
	· ,	TALLASSEE, FL. 323	
			
			\ □ Add
			_ □ Remove
			
			⊥ □ Remove
		·	
	nding or adding additional Articles, er		•
(attach d	additional sheets, if necessary). (Be sp	pecific)	
	· · · · · · · · · · · · · · · · · · ·		
	·		•
•			
• • •	•	·	•
			1
			
			<u>:</u>
F. Ifana	mendment provides for an exchange,	reclassification, or cancellation of	issued shares.
provis	ions for implementing the amendmen		
(if	not applicable, indicate N/A)		*
		<u> </u>	!
	·		<u> </u>
		•	\$ **
•			1
2	· J.		1

The date of each amendment(s) a	loption: 6/16/2010
Effective date if applicable:	(date of adoption is required)
ino	more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	or the amendment(s) was/were sufficient for approval
by	,,
- (vot	ng group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
•	•
Dated 6/16	2010
(By a di selected	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diffduciary by that fiduciary)
_	HUGO PEREZ (Typed or printed name of person signing)
•	(Typed or printed name of person signing)
	VP
•	(Title of person signing)