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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORE	PORATION:	CONSERVAS INC		
DOCUMENT NU	MBER:	P06000099671		
The enclosed Artic	eles of Amendment and fee a	are submitted for filing.		
Please return all co	orrespondence concerning th	is matter to the following:		
		LUISA INCIARTE		
	1	Name of Contact Person		
	EL DORA	L BUSINESS SOLUTIONS		
		Firm/ Company		
	97;	37 NW 41 ST. # 340		
	Planta Action Control of the Control	Address		
		MIAMI-FL. 33178		
		City/ State and Zip Code		
	luisaincia E-mail address: (to be use	rte15@hotmail.com ed for future annual report notification)		
For further information	ation concerning this matter,	please call:		
		at (305) 5080244		
Name	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check	k for the following amount r	nade payable to the Florida Department of State:		
□\$35 Filing Fee	✓ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)		
P.O. Box 6	nt Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

Articles of Amendment to Articles of Incorporation of

C. 20.
the Florida Dept. of State)
the Florida Dept. of State) tion (if known)
tion (if known)
ites, this Florida Profit Corporation adopts the following
on:
The new poration," "company," or "incorporated" or the Corp," "Inc," or "Co". A professional corporation "P. 4"
iation," or the abbreviation "P.A."
5201 Blue Lagoon Dr. # 884
Miami Fl. 33126
5201 Blue Lagoon Dr. # 884 Miami Fl. 33126
e address in Florida, enter the name of the
All and the second of the seco
rida street address)
, Florida
) (Zip Code)
Agent: niliar 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>D</u>	FAROH EDGAR	11223 Marigold Dr. Bradenton Fl. 34207	☐ Add ☐ Remove

	ding or adding additional Articles dditional sheets, if necessary). (B		
<u>proviși</u>	mendment provides for an exchanons for implementing the amendment applicable, indicate N/A)	ge, reclassification, or cancellation tent if not contained in the amend	of issued shares, ment itself:
N/A			

The date of each amendment(s) a	loption: 12/12/2009
Effective date if applicable:	03/12/2010
(no	more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ac by the shareholders was/were s	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	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(voi	ng group)
The amendment(s) was/were ac action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ac action was not required.	opted by the incorporators without shareholder action and shareholder
DatedO	1/2/2010
Signature A	
(By a/at	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 if iduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	DINECTOR
-	(Title of person signing)