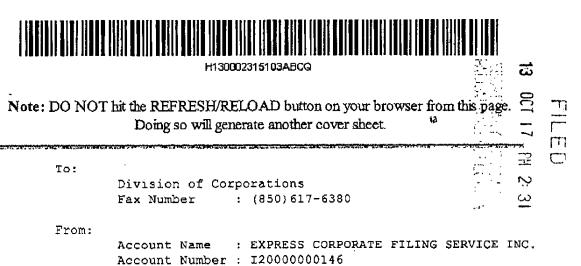


Phone Fax Number

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000231510 3)))



: (305)444-4994

: (305)444-4977

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

| Email | Address: |  |  |  |
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|       |          |  |  |  |

## COR AMND/RESTATE/CORRECT OR O/D RESIGN LATIN FEVA INC.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 05      |
| Estimated Charge      | \$35.00 |



Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as currently P07000018376  | filed with the Florida Dant, of                      | State)   |                      |
|---|--|--|----------------------|
|   | of Corporation (if known)                            |  |                      |
| Pursuant to the provisions of section 607.1006, Flori<br>ts Articles of Incorporation:  | da Statutov, this <i>Florida Profit</i> (            | Corporation adopts the follow                            | ving amendment(s) to |
| . If amending name, onter the new name of the   | corporation:   |  |                      |
| name must be distinguishable and contain the wo<br>"Corp.," "Inc.," or Co.," or the designation "Cor<br>word "chartered," "professional association," or th | p," "Inc," or "Co". A profes.                        | " or "incorporated" or the<br>sional corporation name mu | it contain the       |
| 3. <u>Enter navy principal office address, if applicable</u><br>Principal office address <u>MUST BE A STREET AD</u>   |  |  |                      |
|   |  |  |                      |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Be  | <i>0x</i> 0  |  | E D                  |
|   | A Standard Control of the Charles                    | and the same of the                                      | <u>ω</u>             |
| <ol> <li>If amending the registered agent and/or regists<br/>new registered agent and/or the new registered</li> </ol>                                      | ereg office address in Figrids.<br>d office address: | enter the name of the                                    |                      |
| Name of New Revistered Avent  |  | · · · · · · · · · · · · · · · · · · ·                    | •                    |
|   | (Florida street address)                             |  |                      |
| New Registered Office Address:  | (City)   | Florida (Zip Code)                                       | _                    |
|   |  |  |                      |
| New Registered Agent's Signature, if changing Relatively accept the appointment as registered agent.  | egistered Agent:                                     | ska skilanijana af ika navition                          | <b>.</b>             |

| If amending the Officers and/or Directors, enter the tit | e and name of each officer/director being removed and title, name, and |
|--|--|
| address of each Officer and/or Director being added;     |  |
| /Attack additional shares if assessment                  |  |

(Attach additional sheats, if nectasary)

Please note the office/director title by the first letter of the affice 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, Y as Remove, and Sally Smith, SV as an Add.

| Luckston Fernilly p.m.s.   |           |                      |  |  |
|----------------------------|-----------|----------------------|--|--|
| X Change                   | PI        | John Doe             |  |  |
| X Remove                   | Y         | Mike Jones           |  |  |
| _X Add                     | <u>sv</u> | Sally Smith          |  |  |
| Type of Action (Check One) | Tide      | Name                 | Address                                |  |
| 1) Change                  | VP        | FELIPE ASR VALLS     | 3663 SW 8TH STREET                     |  |
| Add                        |           |                      | MIAMI, FL 33135                        |  |
| Remove                     |           |                      |  |  |
| 2) Change                  | s         | PABLO FAJARDO        | 3063 SW 8TH STREET                     |  |
| Ada                        |           |                      | PENTHOUSE                              |  |
| Remove                     |           |                      | MIAMI, FL 33177                        |  |
| 3) Change                  | VP        | JOSE MILTON ALVARADO | 11882 SW 210 TERRACE                   |  |
| Add                        |           |                      | MIAMI, FL 33177                        |  |
| Remove                     |           | •                    |  |  |
| 4) Change                  | <u>s</u>  | MARIA A ALVARADO     | 11877 SW 209 TERRACE                   |  |
| bbA 🔽                      |           |                      | MIAMI, FL 33177                        |  |
| Rétnové                    |           |                      |  |  |
| 5) Change                  |           |                      |  |  |
| Add                        |           |                      |  |  |
| Remove                     |           |                      |  |  |
| δ) Change                  |           |                      |  |  |
| Add                        |           |                      | ************************************** |  |
| Remov∉                     |           |                      |  |  |

Page 2 of 4

|                                       | essary). (Be specific)        |                                       |                   |  |
|---------------------------------------|-------------------------------|---------------------------------------|-------------------|--|
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|                                       |                               |                                       |                   |  |
|                                       |                               |                                       |                   |  |
| n nmendment provides for              | an exchange, reclassific      | cation, or cancellation               | of issued shares. |  |
| <u>ovisions for implementing t</u>    | <u>be amendment if not co</u> | ontained in the amond                 | ment Itaelf:      |  |
|                                       | N/A)                          |                                       |                   |  |
| (if not applicable, indicate          |                               |                                       |                   |  |
| (if not applicable, indicate          |                               |                                       |                   |  |
| (if not applicable, indicate          | -                             |                                       |                   |  |
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| (if not applicable, indicate          |                               |                                       |                   |  |
| (if not applicable, indicate)         |                               |                                       |                   | and the same of th |
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|                                       |                               |                                       |                   |  |
|                                       |                               |                                       |                   |  |
|                                       |                               |                                       |                   |  |

| The date of each amendment(s) adoption: OCTOBER 17, 2013   | , if other than the |
|--|---------------------|
| date this document was signed.   |                     |
| Effective date if applicable:  |                     |
| (no more than 90 days after amendment file date)   |                     |
| Adoption of Ameadment(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   |                     |
| (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.   |                     |
| Dated OCTOBER 17, 2013   |                     |
| Signature Adam   |                     |
| (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)   |                     |
| JUAN ALLATIADU   |                     |
| (Typed or printed name of person signing)  |                     |
| GESTOEN  | <del></del>         |
| (Title of person signing)  |                     |