÷\$. . کمبوتیرو Page 1 of Corp Florida Department of State **Division of Corporations Public Access System Electronic Filing Cover Sheet** 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. (((H0900039455 3))) H090000394653ABC2 Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. To: Division of Corporations Fax Number : (850)617-6380 From: Account Name : FASTKIT CORPORATE OUTFITS Account Number : 071001002335 Phone : (305)599-0839 : (305)716-0346 Fax Number

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February 20, 2009

FLORIDA DEPARTMENT OF STATE Division of Corporations

VALLEYCREST INVESTMENT INC 13876 SW 56TH STREET UNIT 388 MIAMI, FL 33175

SUBJECT: VALLEYCREST INVESTMENT INC REF: P07000069373

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please accept our apology for failing to mention this in our previous letter.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 509A00006121

P.O BOX 6327-Tallahassec, Florida 32314



February 20, 2009

FLORIDA DEPARTMENT OF STATE Division of Corporations

VALLEYCREST INVESTMENT INC 13876 SW 56TH STREET UNIT 388 MIAMI, FL 33175

SUBJECT: VALLEYCREST INVESTMENT INC REF: P07000069373

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 209A00006045

P.O BOX 6327 - Tallahassee, Florida 32314

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Articles of Amendment to Articles of Incorporation of

VALLEYCREST INVESTMENT INC (Name of Corporation as currently filed with the Florida Dept. of State)

P07000069373

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amondment(s) to its Articles of Incorporation:

A. If amending name, en er the new name of the corporation:

FLORIDA HOMEOWNERS ASSISTANCE SERVICES INC .

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abureviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professionce corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B.	Enter new principal o Hee address, if applicable:	
Pr	ncipal office address <u>MUST BE A STREET ADDRES</u>	53)

13876 SW 56TH ST UNIT 388

MIAMI, FL 33175_

C.	Enter new mailing ad dress, if applicable:
	(Mailing address MA) BE A POST OFFICE BOX

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address;

Name of New Registered Agent:

New Ragistered Office Address:

(Florida street address)

(City)

Florida_

(Zip Coda)

New Registered Agent's ! ignature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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If amending the Officers jud/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, [necessary)

<u>Title</u>	Name	Address	Type of Action
VPD	SOSA SORANYI	13876 SW 56TH ST UNIT 388 MIAMI, EL 33175	Add Remove
			Add Remove
			Add Remove

E. If amending or adding additional Articles, cater change(s) here:

(attach additional sheets, if necessary). (Be specific)

N/A ···· . F. If an amendment provides for an exchange, reclassification, or cancellation of issued abares, provisions for implem ming the amendment if not contained in the amendment itself; (If not applicable, it dicate N/A) N/A _____

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The date of each amendu ent(s) adoption: 02/18/2009

Effective date if applicable: 02/18/2009

(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHEC

(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 yo is 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 02'18/2009

Signature

Fer. rmiro

(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 sppointed fiduciary by that fiduciary)

FERNANDEZ SOIMIRO

(Typed or printed name of person signing)

PD

(Title of person signing)

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