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May Elms

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: CARJOS JOVES COFF
DOCUMENT NUMBER: P07000070955
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JUAN CARLOS LOPEZ
Name of Contact Person CARLOS Joles CORP
Firm/ Company 60 EAST 61 STREET
Highest FL 33013
City/ State and Zip Code
For further information concerning this matter, please call: JUAN OPPLOS Soleman (786) 251-9089
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is cnclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32304

Articles of Amendment to **Articles of Incorporation** of

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TALLANASSEE, FLORIDA	

(Name of Corporation as currently filed with the Florida Dept. of State P07000072955 (Document Number of Corporation (if known) resuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corpo Articles of Incorporation: If amending name, enter the new name of the corporation: NA me must be distinguishable and contain the word "corporation," "company," or Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional ord "chartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS)	ration adopts the f	ollowing amendmen
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Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS)	"incorporated" of corporation name	r the abbreviation e must contain the
incipal office address <u>MUST BE A STREET ADDRESS</u>)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		-
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		
(Florida street address)		
New Registered Office Address:	Florida	
(City)	(Zip C	ode)
	(2-1-	
	(2.5)	
w Registered Agent's Signature, if changing Registered Agent: ereby accept the appointment as registered agent. I am familiar with and accept the of	(37 5	
теоу ассерт те арронитет из тедълетей адет. Тит јитиш жин ини иссерт те от	• •	osition
Signature of New Registered Agent if changing	• •	osition.

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	,
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name -	<u>Addres</u> s
1) Change		CARLOS JORG	HIALEAH, FL 33013
Add			HIGHEAL, FL. 33013
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	<u> </u>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		•	

E. <u>If am</u> (Attac	nending or adding additional Art ch additional sheets, if necessary). N	(Be specific)	ge(s) here:		
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<u>If an</u>	amendment provides for an excl	hange, reclassific	ation, or cancell	ation of issued sha	res _a
prov	visions for implementing the ame (if not applicable, indicate N/A)	<u>endment if not co</u>	ntained in the ar	nendment itself:	
				·	
			····		
				**	
	·				

The date of each amendment(s) a	dention: 05/09/2013
	05/09/003
Effective date <u>if applicable</u> :	no more than 90 days after amendment file dutc)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the sharcholders through voting groups. The following statement 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	(voling group)
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated	05/09/2013
Signature	Luon & Line
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court
appoin	Juan Galos Johan
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)