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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 LPR - | PH 12: 47

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## **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ado @ souzobarros Securifica address: (to be used for future annual report notification) For further information concerning this matter, please call: Gonzalez at (305) 967.7903

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee **☑** \$43.75 Filing Fee & ■ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

of

	arros Secu	rities INC	
(Name of Corporation as curr			
	nber of Corporation (if kn	<u>'                                    </u>	
·	•	,	
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this	Florida Profit Corporation ad	opts the following
A. If amending name, enter the new name o	f the corporation:		
	7.41	<u> </u>	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "Corp," "In	nc," or "Co". A professional	
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>			_
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)  D. If amending the registered agent and/or new registered agent and/or the new registered Agent:	CE BOX) registered office address	in Florida, enter the name of	SECRETARY OF STATEMS SIVISION OF CORPORATIONS 11 APR -1 PH 12: 47
New Registered Office Address:	(Florida street	address)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered at the second s	igent. I am familiar with		he position.
រ	Signature of New Register	eu Ageni, ij chunging	

## 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	<u>Address</u>	Type of Action
<u>((CO</u>	Micardo Gonzala  Raiko Bikelis	1221 Brickell Ave Suite 1120 Miani FL 33131	_ 🗹 Add _ 🗆 Remove
<u> 200</u>	Marko Dikelis	Swite 1120 Miami, Fl. 33131	□ Remove
			_ ☐ Add _ ☐ Remove
	ding or adding additional Articles, enter		
(attach a	dditional sheets, if necessary). (Be specij	fic)	
	· ·		
		<del></del> -	
<u>provisi</u> c	nendment provides for an exchange, recl ons for implementing the amendment if r		
(if n	ot applicable, indicate N/A)		
,			
_			

The date of each amendment(s) adoption:			
	(date of adoption is required)		
Effective date <u>if applicable</u> :			
(no	o 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	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.		
	oproved by the shareholders through voting groups. The following statement reach 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	."		
(voi	ting group)		
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder		
selected	rector, president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)		
- -	Tose V. Alvarado  (Typed or printed name of person signing)  Tresident and Chief Executive Officer  (Title of person signing)		