P08000038817

| (Requestor's Name) | |
|---|----------|
| | |
| (Address) | |
| | |
| (Address) | |
| | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | <i>i</i> |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
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Cont 13/1.0%

COVER LETTER

1:0: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: OPTOFIX COR | P | **** |
|---------------------------|---|--|--|
| DOCUMENT NUMBE | ER: <u>P08000038817</u> | | |
| The enclosed Articles of | f Amendment and fee are su | abmitted for filing. | |
| Please return all corresp | ondence concerning this ma | atter to the following: | |
| | ALI | EJANDRO G. PROTTO | |
| , | . N | ame of Contact Person | |
| | C | PTOFIX CORP. | |
| | | Firm/ Company | |
| | 0.5 | 45 CW 274 C4 | |
| | 95 | 45 SW 37th Street Address | |
| | | | |
| | | ami Florida 33165 | |
| | C | ity/ State and Zip Code | |
| | am a | ratta@hatmail.aam | |
| | E-mail address: (to be u | rotto@hotmail.com sed for future annual report | notification) |
| | : | | |
| For further information | concerning this matter, plea | se call: | |
| | , _F , _F | | |
| Alejandro G. Protto | | at (786 |) 281-8432 |
| Name of | Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for | the following amount made | payable to the Florida Dep | artment of State: |
| ☑ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| <u>Maili</u> | ng Address | <u>Street</u> | Address |
| | dment Section | | Iment Section |
| | on of Corporations Box 6327 | | on of Corporations Building |
| | assee, FL 32314 | | xecutive Center Circle |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| OI. | | |
|---|--|-------|
| OPTOFIX COR | RP | |
| (Name of Corporation as currently filed with the | | |
| P08000038817 | | |
| (Document Number of Corporation | (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, amendment(s) to its Articles of Incorporation: | , this Florida Profit Corporation adopts the following | wing |
| A. If amending name, enter the new name of the corporation: | J** | |
| N/A | , | |
| The new name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp name must contain the word "chartered," "professional association. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | o," "Inc," or "Co". A professional corporation | MILED |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 9545 SW 37th STREET MIAMI FL 33165 | |
| D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address Name of New Registered Agent: ALEJANDRO G. PROTT | ss: | |
| 9545 SW 37th STREET | | |
| | treet address) | |
| New Registered Office Address: MIAMI (City | , Florida <u>33165</u> (Zip Code) | |
| New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian Signature of New Registered | with with accept the obligations of the position. | |

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Qur database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

| Title(s) | <u>Name</u> | Address |
|---------------|--------------------------------------|--|
| 1) <u>PD</u> | ALEJANDRO G. PROTI | O 9545 SW 37th STREET Miami Florida 33165 |
| 2) <u>VPD</u> | ARIDAY CUEVAS | 9545 SW 37th STREET Miami Florida 33165 |
| 3) | | |
| 4) | | |
| 5) | <u></u> | |
| 6) | | |
| If REMOVING | G an officer and/or director, please | ist the title(s) and name of the officer/director to be removed: |
| Title(s) | <u>Name</u> | <u>Title(s)</u> <u>Name</u> |
| 1) | | 4) |
| 2) | | . 5) |
| _, | | |

| E. If amending or adding additional Article (attach additional sheets, if necessary). | (Be specific) |
|---|---------------|
| NONE | |
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| F. If an amendment provisions for im (if not applicab | provides for an exchange, reclassification, or plementing the amendment if not contained in ble, indicate N/A) | cancellation of issued shares, the amendment itself: |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| The date of each amer | ndment(s) adoption: 11/10/2011 | |
| | | |
| Effective date <u>if appli</u> c | | after amendment file date) |
| Adoption of Amendmo | ent(s) (<u>CHECK ONE</u>) | |
| | was/were adopted by the shareholders. The numl was/were sufficient for approval. | ber of votes cast for the amendment(s) |
| | was/were approved by the shareholders through vas/were approved by the shareholders through value se | |
| "The number of | of votes cast for the amendment(s) was/were suff | icient for approval |
| by | 100 % | " |
| | (voting group) | |
| The amendment(s) vaction was not requi | was/were adopted by the board of directors witho red. | ut shareholder action and shareholder |
| ☐ The amendment(s) v action was not require | was/were adopted by the incorporators without shred. | areholder action and shareholder |
| Dated | 11/10/2011 | |
| Signa | nture | |
| Ç | (By a director, president or other officer – if selected, by an incorporator – if in the hand appointed fiduciary by that fiduciary) | |
| | ALEJANDRO G. PR | отто |
| | (Typed or printed name of | |
| | President | |
| | (Title of ne | rson signing) |