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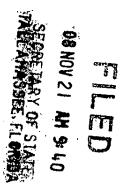
(Re	equestor's Name)	
(Ac	ldress)	
. (Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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Amond C.COULLIETTE

NOV 2 5 2008

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: AAPROF SERVICES INC			
DOCUMENT N	U MBER: _ P08000039865		
The enclosed Arti	cles of Amendment and fee a	are submitted for filing.	
Please return all c	orrespondence concerning th	is matter to the following:	
		Olga Rivera	
	(Name	of Contact Person)	
		PROF SERVICES INC	
	(F)	rm/ Company)	
	574	9 Cedar Pine DR.	
		(Address)	
		ndo Florida 32819	
For further inform	City/ S action concerning this matter,	State and Zip Code)	
	manor,	promo oun.	
Olga Rivera	ne of Contact Person)	at (407) 345834	
·	•	nade payable to the Florida De	ne Telephone Number) epartment 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)
Mailing A		Street Address Amendment Section	
Amendment Section Division of Corporations		Division of Corporations	3
P.O. Box 6327		Clifton Building	•

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

VI	6	
AAPROF SERVICES	SINC	
(Name of Corporation as currently filed with t	he Florida Dept. of State)	
P08000039865		
(Document Number of Corporation	on (if known)	
Pursuant to the provisions of section 607.1006, Florida Statute following amendment(s) to its Articles of Incorporation:	es, this Florida Profit Corpor	
A. If amending name, enter the new name of the corporation	<u>ı:</u>	
The new name must be distinguishable and contain the "incorporated" or the abbreviation "Corp.," "Inc.," or Co., "Co". A professional corporation name must contain association," or the abbreviation "P.A."	" or the designation "Corp," "Inc," or	
B. Enter new principal office address, if applicable:	5749 Cedar Pine DR.	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Orlando Florida 32819	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5749 Cedar Pine DR Orlando Florida 32819	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add		
Name of New Registered Agent:		
New Registered Office Address: 5749 Caa	da street address)	
	(City), Florida 32819 (City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am for position.	<u>eent:</u>	
Signature of New I	Registered Agent, if changing	

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>	<u>Name</u>	<u>Address</u>	Type of Action
<u>VP</u>	Jose A Quintero	5749 Cedar Pine DR	
		Orlando Florida 32819	Remove
<u>VP</u>	Andrea Andrade	5749 Cedar Pine DR Orlando Florida 32819	Add Remove
	·		Q Add Q Remove
E. <u>If amen</u> (attach a	ding or adding additional Artic additional sheets, if necessary).	les, enter change(s) here: (Be specific)	

provisi	mendment provides for an exchange one for implementing the amend not applicable, indicate N/A)	ange, reclassification, or cancellation of i dment if not contained in the amendmen	ssued shares, t itself:

Th	ne date of each amendmen	t(s) adoption: <u>11/15/2008</u>
Ef	fective date <u>if applicable</u> :	11/15/2008
	<u> прр.:ши:-</u> .	(no more than 90 days after amendment file date)
Αt	loption of Amendment(s)	(CHECK ONE)
Ø	The amendment(s) was/we by the shareholders was/w	are adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
		are approved by the shareholders through voting groups. The following statement and 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)
	action was not required.	are adopted by the board of directors without shareholder action and shareholder are adopted by the incorporators without shareholder action and shareholder
	Dated_11/14 Signature	1/2008 Julija
	(By sele	a director, president of other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
		Olga Rivera
		(Typed or printed name of person signing)
		Presidente
		(Title of person signing)