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(((H09000132045 3)))



H090001320453ABCY

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number : 072450003255 : (305)634-3694 Phone

: (305)633-9696 Fax Number

COR AMND/RESTATE/CORRECT OR O/D RESIGN

EDIMINE HAND CONSTRUCTION & REAL ESTATE DEVELOPMENT,

 $\ddot{\omega}$

PAGE 01/04

| Certificate of Status | 0 |
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Corporate Filing Menu

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5/29/2009

EMPIRE CORP KIT

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(y)

Articles of Amendment H09000132045 Articles of Incorporation

DIVINE HAND CONSTRUCTION & REAL ESTATE DEVELOPMENT, INC.

| (Name of Corporation as can | resity filed with the Florida De | ept. of State) | • | |
|--|---|--------------------------|--------------------------------|---|
| , P0 | 8000051075 | | | |
| (Document N | umber of Corporation (if known) | | | |
| Parament to the provisions of section 607.10 amendment(s) to its Articles of Incorporation | 006, Florida Statutes, this Florid : | la Profit Corporation a | dopts the following | |
| A. If amending name, cutar the new name | of the corporation: | | | |
| DIVINE HAND REAL | The new | | | |
| name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or to name must contain the word "chartered," "p | he designation "Corp," "Inc," o | r "Co". A projessiono | ated" or the il corporation | |
| B. Enter new principal office address, if a (Principal office address MUST HE A STRE | | | _ | |
| | | | | |
| C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OF) | | | | |
| | | | | |
| D. If supending the registered spent and/or new registerest agent and/or the new re- | r registered office address: pistered office address: | orida, emer the name (| ECRETARY OF SU | 1 |
| Name of New Registered Agent: | | | SSFE AM | • |
| New Registered Office Address: | (Florida street addr | | TELETON STA | |
| | (City) | , Florida (Zip Code) | E A S | Л |
| New Registered Agent's Signature, if cham I hereby accept the appointment as registered | <u>ving Registered Arent:</u> Lagent. I am familiar with and c | ecept the obligations of | the position | |
| - | Signature of New Registered Ag | ent, if changing | | |

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H09000132045

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, (f necessary) <u>Tiûe</u> Name Address Type of Action VP KAREEM ALI 2083 NW 70th TERRACE. ☑ Add MIAMI, FLORIDA 33147 ☐ Ramove ☐ Remove ☐ Add ☐ Remove E. If smenting or adding additional Articles, enter change(s) bere: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, recisesification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself; (if not applicable, indicate N/A)

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| The date of each amendment | (s) adoption; MAY 28, 2009 | H090 | 00125042 |
|---|---|--|---------------|
| Effective date I applicable: | | | |
| | (no more than 90 days after a | mendment file date) | |
| Adoption of Amendment(s) | (CHECK ONE) | | • |
| The amendment(s) was/we by the shareholders was/we | | The number of votes cast for the | emendment(s) |
| | | through voting groups. The follow | |
| "The number of votes | east for the amendment(s) was/ | were sufficient for approval | |
| by | | | |
| | (voting group) | | |
| The amendment(s) was/wes action was not required. | e adopted by the board of direc | turs Without shareholder action an | d sharcholder |
| The amendment(s) was/wer action was not required. | e adopted by the incorporators | Without shareholder action and sha | veholder |
| Dated MAY | 28, 2009 | | |
| Signature | Mari Del | tu-0 | |
| | | icer - if directors or officers have | |
| | need, by an incorporation — it is to control fiduciary by that fiduciary | the hands of a receiver, trustee, or (y) | SOME CONT. |
| | - • | • | |
| | MARIE | E SEJOUR | |
| | (Typed or printed t | omne of person signing) | - |
| | PRE | ESIDENT | |
| | (Title of person rigning | | - |

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