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SECRETARY OF STAJE.

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:CM	: CM RAMIREZ ENTERPRISES, INC.			
DOCUMENT NUMB	ER:	P08000054434			
The enclosed Articles	of Amendment and fee ar	re submitted for filing.			
Please return all corres	pondence concerning this	s matter to the following:			
	AIXA D. LOPEZ-AVILES				
	N	ame of Contact Person			
EQUINOX SOLUTIONS, LLC					
	Firm/ Company				
	6900 S. ORANGE BLOSSOM TRAIL SUITE 408				
		Address			
Marie Commence	ORLANDO, FL 32809				
	•	ity/ State and Zip Code			
· <i>'</i>	A.AVILE E-mail address: (to be used	ES@EQ-SO.COM d for future annual report notification)			
For further information	n concerning this matter,	please call:			
Aixa D	. Lopez-Aviles	at (407) 85 Area Code & Daytime Tel	50-7280		
	_	nade payable to the Florida Depart			
✓ \$35 Filing Fee	S43.75 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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section			
		Division of Corporations			
		Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301	le		

Articles of Amendment **Articles of Incorporation** of

•	Articles of Amendment to Articles of Incorporation of		2009 NOV 30 PM 12: 34 FALLAHASSEE, FLORIDA
CM RAMIRE	Z ENTERPRISES, INC.		MECREY 30 PH 12: 2
(Name of Corporation as cur	rently filed with the Florida Dep	ot. of State)	TALLAHASSE OF
P0	8000054434		E. FLORIDA
(Document N	umber of Corporation (if known)		- A
Pursuant to the provisions of section 607.10 mendment(s) to its Articles of Incorporation		Profit Corporation	adopts the following
A. If amending name, enter the new name	of the corporation:		
			The new
B. Enter new principal office address, if a Principal office address MUST BE A STRI	See:		
D. If amending the registered agent and/o new registered agent and/or the new re		rida, enter the name	e of the
Name of New Registered Agent:			
New Registered Office Address:	(Florida street addre.		٠ س
	(City)	, Florida (Zip Code)	
	ging Registered Agent		
Naw Dogistored Agent's Signature if show			
New Registered Agent's Signature, if chan I hereby accept the appointment as registered		ccept the obligations	of the position.

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> </u>	CLAUDIA RAMIREZ	13101 HEATHER MOSS APT, 904 ORLANDO, FL 32809	
<u>P</u>	ANGEL RONCANCIO	13101 HEATHER MOSS APT. 904 ORLANDO, FL 32809	☑ Add □ Remove
	<u></u>		
(attach a	dditional sheets, if necessary). (Be s	pecific)	
F. If an ar	nendment provides for an exchange, ons for implementing the amendmen	reclassification, or cancellation of	issued shares,
(if n	ot applicable, indicate N/A)		
157			

The date of each amendmen	(s) adoption: <u>11/18/20</u>	09
Effective date <u>if applicable</u> :	11/18/2009 (date	of adoption is required)
<u></u>	(no more than 90 days o	fter amendment file date)
Adoption of Amendment(s)	(CHECK O	NE)
The amendment(s) was/we by the shareholders was/w		olders. The number of votes cast for the amendment(s)
		nolders through voting groups. The following statement intitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	(voting group)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board o	f directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorpo	orators without shareholder action and shareholder
Dated	11-23-09	
Signature _	11-23-09 Jugil: Pa	ther office - if directors or officers have not been
		iner officer – if directors or officers have not been if in the hands of a receiver, trustee, or other court
	pointed fiduciary by that f	
	AN	GEL RONCANCIO
	(Typed or p	printed name of person signing)
		PRESIDENT
	(Title of person	