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(Re	equestor's Name)	
(Ad	ldress)	<u></u>
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(Ad	dress)	
(Cit	ty/State/Zip/Phone) #)
PICK-UP	WAIT	MAIL.
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: PENSANTE SERVICES CORP The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Firm/ Company Address Cicardo xobando a yahoo. com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Ri cardo Obando

Name of Contact Person at (305) 772-4211

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

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Certificate of Status

Street Address

Certified Copy

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Additional copy is enclosed)

Certificate of Status

(Additional Copy is enclosed)

Certified Copy

Articles of Amendment to Articles of Incorporation of

PENSANTE >		
(Name of Corporation as co	urrently filed with the Florida Dept. of State)	
P08000063	26 <i>50</i>	
(Document 1	Number of Corporation (if known)	
Pursuant to the provisions of section 607. amendment(s) to its Articles of Incorporation	1006, Florida Statutes, this Florida Profit Corporation adopts the folon:	llowing
A. If amending name, enter the new nam	e of the corporation:	
	The new	43
abbreviation "Corp.," "Inc.," or Co.," or	the word "corporation," "company," or "incorporated" or the the designation "Corp," "Inc," or "Co". A professional corporation professional association," or the abbreviation "P.A." applicable: REET ADDRESS AND	e ,
D. If amending the registered agent and/ new registered agent and/or the new r	or registered office address in Florida, enter the name of the registered office address;	
Name of New Registered Agent:	MARISSA OBANDO	
New Registered Office Address:	(Florida street address)	
	CORAL GABLES, Florida 33/34 (City) (Zip Code)	
	(City) (Zip Code)	
New Registered Agent's Signature, if cha	anging Registered Agent: ed agent. I am familiar with and accept the obligations of the position.	
	•	
	Mussa Olimbo Signature of New Registered Agent, if changing	
	Digitalia e of them the Ristered 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)

Title	Name	Address	Type of Action
DPS	RICARDO OBANDO	121 ZAMORA AVE #307 COPAL GABLES FL33134	☐ Add Remove
DPS	MARISSA OBANDO	(21 ZAMORA AVE #307 CORAL GABLES FL 33134	Add Remove
			☐ Add☐ Remove
(attach ac	dditional sheets, if necessary). (Be s	pecific)	
provision	mendment provides for an exchange, ons for implementing the amendment of applicable, indicate N/A)	reclassification, or cancellation of isset if not contained in the amendment	sued shares, itself:

The date of each amendment(s)	adoption: $7/9/09$
•	(date of adoption is required)
Effective date if applicable:.	no more than 90 days after amendment file date)
, ,	no more incur 20 days after amenament fre dates
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	st for the amendment(s) was/were sufficient for approval
by	"
(V	oting group)
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated 7	19109
Signature	Clu
	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court
	nted fiduciary by that fiduciary)
_	RICARDO OBANDO
	(Typed or printed name of person signing)
_	Title of person signing)
·	(Title of person signing)