### Florida Department of State

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#### COR AMND/RESTATE/CORRECT OR O/D RESIGN PADOVA INVESTMENTS, INC.

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FILED

Articles of Amendment to Articles of Incorporation 2013 NOV 13 AM 11: 46

SECULE MAY OF STATE TALLAHASSEE, FLORIDA

#### PADOVA INVESTMENTS INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P08000079466

(Document Number of Corporation (if known)

mendment(s) to

The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain word "chartered." "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  (Zip Code)	4. If a more directions are supported to the grown of the			
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain word "chartered." "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Malling address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  (Florida street address)  New Registered Office Address:  Florida	A. It amending hame, enter the new hame of the C	hi hái stion:		
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(Florida street address)  New Registered Office Address:, Florida		\ <del></del>		
New Registered Office Address:, Florida	Name of New Registered Agent			
New Registered Office Address:, Florida				
		(Florida street address,	)	
(City) (Zip Code)	New Registered Office Address:			_
		(City)	(Zip Code)	
•			•	
,		,		
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			ecent the obligations of the position	

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Signature of New Registered Agent, if changing

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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)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>enes</u>	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>	•	Name	Address
1) Change	DVP	·	FANNY DE LIBI	1335 NW 98TH CT
Add				DORAL, FL 33172
Remove				
2) Change		_		
Add				
Remove				
3) Change		_	***************************************	
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add		_		
Remove				
Kemove				
6) Change		<u> </u>		
Add				
Remove				

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f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
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f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

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The date of each amendment(s) adoption:  date this document was signed.	, if other than the
Effective date if applicable:  (no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated NOVEMBER 3, 2013	
Signature Aura (1)	
(By a director, presidention other officer — if directors or officers have not been selected, by an incorporator—if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
MAURO LIBI	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of nervon signing)	

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