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COVER LETTER

TO: Amendment Section
Division of Corporations

DOCUMENT NUMBER: The enclosed Articles of Amendment and fe Please return all correspondence concerning		
•		
Please return all correspondence concerning	e are submitted for filing.	
· · · · · · · · · · · · · · · · · · ·	this matter to the following:	
	MIGUEL A PENA	
	Name of Contact Person	
MIGUE	L & CESAR SERVICES INC	
	Firm/ Company	
70	19 CONCORD DR # 23	
	Address	
	TAMPA, FL 33614	
•	City/ State and Zip Code	
miguelpe E-mail address: (to be	eña-2008@hotmail.com used for future annual report notification)	
For further information concerning this matte	er, please call:	
MIGUEL PENA	at (<u>813</u>) <u>426-2259</u> Area Code & Daytime Telephone Number	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amoun	t made payable to the Florida Department of State:	
	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)	nclosed)
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 Circle	

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

MIGUEL & CESAR SERVICES INC

•		·
•	Articles of Amendment	
	to	F
•	Articles of Incorporation	20 16
	of	ZUD9 JUN
	CESAR SERVICES INC	TALLAHASSEE. FLORID
(Name of Corporation as co	urrently filed with the Florida Dep	t. of State)
	08000093553	
(Document l	Number of Corporation (if known)	ON ID
Pursuant to the provisions of section 607. mendment(s) to its Articles of Incorporation		
A. If amending name, enter the new nam	e of the corporation:	
name must be distinguishable and conta	N/A	The new
Principal office address <u>MUST BE A STR</u>	<u>N/A</u>	
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
	N/A	
). If amending the registered agent and/		ida, enter the name of the
new registered agent and/or the new r	egistered office address:	
Name of New Registered Agent:	IGNACIA GUTIERREZ	
	6209 YORKSHIRE CT APT	Г 238
New Registered Office Address:	(Florida street address	r)
New Registered Office Address:		,
New Registered Office Address:	(Florida street address TAMPA (City)	;) , Florida <u>33614</u> (Zip Code)
	TAMPA (City)	, Florida 33614
New Registered Agent's Signature, if cha	TAMPA (City) nging Registered Agent:	, Florida <u>33614</u> (Zip Code)
New Registered Office Address: New Registered Agent's Signature, if char Thereby accept the appointment as registered.	TAMPA (City) nging Registered Agent:	, Florida 33614 (Zip Code) rept 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>	Name	Address	Type of Action
<u> </u>	IGNACIA GUTIERREZ	6209 YORKSHIRE CT # 238 TAMPA . FL 33614	☑ Add □ Remove
<u>VP</u>	MIGUEL A PENA	7019 CONCORD DR # 23 TAMPA , FL 33604	☐ Add ☐ Remove
<u>s</u>	CESAR PENA	7019 CONCORD DR # 23 TAMPA , FL 33604	☐ Add ☐ Remove
N/A			
provisions	idment provides for an exchange, recla for implementing the amendment if ne applicable, indicate N/A)		

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 Address_ Name Type of Action T **ERELI PENA** TAMPA .FL 33614 ☐ Remove _____ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) N/À F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) N/A

The date of each amendment(s) adoption: 05/27/2009				
Effective date if applicable:	05/27/2009			
	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
	ere adopted by the shareholders. The number of votes cast for the amendment(s) tere sufficient for approval.			
	ere approved by the shareholders through voting groups. The following statement ed 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)			
	(voting group)			
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder			
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder			
Dated 05/2	27/2009			
Signature	Agnacio Lutiens			
	a director, president or 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)			
	IGNACIA GUTIERREZ			
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			