P08000099/89

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M/C Append. 01-31-11 Dc

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORP	ORATION:	Las Villas Promotions	, Inc.
DOCUMENT NUM	MBER:	P0800009918	9
The enclosed Articl	es of Amendment and fee a	re submitted for filing.	
Please return all cor	respondence concerning thi	s matter to the following:	
_		Antonio Perez	
	N	ame of Contact Person	
-		Firm/ Company	
_	7245	North Augusta Drive	
		Address	
_		Miami, FL 33015	
	magda_lo	pez@bellsouth.net	
	E-mail address: (to be used	d for future annual report notification)
For further informat	ion concerning this matter,	please call:	
	ntonio Perez	at (305)	823-4120
Name o	f Contact Person	Area Code & Daytime	Telephone Number
Enclosed is a check	for the following amount m	ade payable to the Florida Dep	artment of State:
□ \$35 Filing Fee	\$43.75 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 Add Amendment Division of C P.O. Box 632	Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

LAS VILLAS PROMOTIONS, INC.

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

P08000099189

(Document Number of Corporation (if known)

wing

L.V. F	PROMOTIONS,	INC.	The new
name must be distinguishable and containable by and containable and containable and contain the word "chartered," "	the designation "C	Corp, " "Inc, " or	'Co". A professional corporation
B. Enter new principal office address, if applicable:		7245 North A	Augusta Drive
Principal office address <u>MUST BE A STR</u>	<u>EET ADDRESS</u>)	Miami, FL 3	3015
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7245 North A	ugusta Drive
		Miami, FL 33015	
D. If amending the registered agent and/o new registered agent and/or the new re			da, enter the name of the
Name of New Registered Agent:	ROSA GON	ZALEZ	
New Registered Office Address:		Augusta Drive ida street address)
	Miami (City)		, Florida <u>33015</u> (Zip Code)

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	<u>Name</u>	<u>Address</u>	Type of Action
<u> </u>	Antonio Perez	5394 Palm Avenue Hialeah, FL 33012	
<u>P</u>	Rosa Gonzalez	7245 North Augusta Drive Miami, FL 33015	☑ Add ☐ Remove
(attach a	iding or adding additional Articles additional sheets, if necessary). (B	e specific)	
 -			
<u>provis</u>	mendment provides for an exchan ions for implementing the amendn not applicable, indicate N/A)	ge, reclassification, or cancellation of nent if not contained in the amendmen	issued shares, it itself:
			

The date of each amendmen	t(s) adoption: January 1, 2011
Effective date <u>if applicable</u> :	January 1, 2011 January 1, 2011
incerto date irappiicable.	(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) ere sufficient for approval.
7 7	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} Las Villas Pron	notions, Inc
	(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(John 21-2011 (Malline)
` •	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)
	ANTONIO PEDEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)