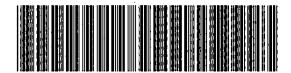
## P08000099385

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

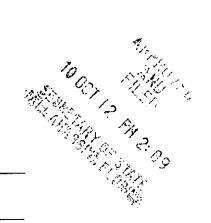
Tallahassee, FL 32314

NAME OF CORI	PORATION:	Coco Smile, Inc.	
DOCUMENT NU	P080000	099385	· .
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
Sam	uel Spencer Blum, Esqu	ire	·
	N	lame of Contact Person	<del></del>
	Samuel Spencer Bl	lum , Attorney at Law	
		Firm/ Company	
	2666 Tigertail Avenu	ne, Suite 106 Address	
	Coconut GRove, Flori	da 33133 ity/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	sam@samblum.com  E-mail address: (to be use	d for future annual report notification)	
For further informa	ation concerning this matter,		
Samuel Sp	encer Blum	at ( <u>305</u> ) <u>854</u> -	1885
Name	of Contact Person	Area Code & Daytime Te	lephone Number
Enclosed is a check	for the following amount m	nade payable to the Florida Depar	tment 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 Ac Amendmen Division of P.O. Box 63	t 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



(Name of Corporation as currently filed with the Florida Dept. of State)  P08000099385  (Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the amendment(s) to its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  The name must be distinguishable and contain the word "corporation." "company," or "incorporated" or abbreviation "Corp.," "Inc.," or "Co." A professional corporation must contain the 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)  Suite 106  Coconut Grove, Florida 33133  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:	ζ6 - <b>`'</b> * & π̂'ε
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C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  Suite 106  Coconut Grove, Florida 33133  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:	
(Mailing address MAY BE A POST OFFICE BOX)  2666 Tigertail Avenue  Suite 106  Coconut Grove, Florida 33133.  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:	
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new registered agent and/or the new registered office address:	
Name of New Registered Agent:	
Nume of New Registered Agent.	
New Registered Office Address: (Florida street address)	
, Florida	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position	•

Signature of New Registered 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
P <b>S</b> D	Jœl K. Slater	243 West Sabal Palm Pla	ice TI Add
		Longwood, Florida 32779	
P <u>SD</u>	David Wollach	2666 Tigertail Avenue Suite 106	☐ Remove
www. /ca		Coconut Grove, Florida	33133
VP/Sec	Robert Wollach	175 Bloor St. East	<b>△</b> Add
		Suite 807, South Tower	Remove
	ding or adding additional Articl dditional sheets, if necessary).		
provisio		nge, reclassification, or cancellation of issument if not contained in the amendment its	
			<del></del>
			/

<sup>€</sup> The date of each amendment(s) a	adoption: September 27, 2010
Effective date if applicable:	(date of adoption is required)
	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad by the shareholders was/were so	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
•	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast t	for the amendment(s) was/were sufficient for approval
by	27
(voti	ing group)
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated	
Signature X	
(By a dire	ector, president or other officer - if directors or officers have not been
	by an incorporator – if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)
арроппод	indicially by that houseless;
	David Wollach
	(Typed or printed name of person signing)
	President
<del></del> -	(Title of person signing)