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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Malla

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:	CONCISE	SERVICES C	ORPO	RATION
DOCUMENT NUMBER:			P0900000)8438	
The enclosed Artica	les of Amendment	and fee are subr	nitted for filing.		
Please return all co	rrespondence conce	erning this matte	er to the following:		
<u>-</u>	<u>.</u>		RMO DIAZ		
		Name of (Contact Person		
_		MASTER ACC	COUNTANTS, PA	<u> </u>	
9301 MILLER DRIVE SUITE F Address					
		MIAMI. FL	ORIDA 33165		
City/ State and Zip Code					
	MA E-mail address:	STERTAXEXF	PA@AOL.COM ure annual report notif	ication)	
For further informa	tion concerning thi	s matter, please	call:		
GU	ILLERMO DIAZ	_ a	t (786)		3-4521
Name	of Contact Person		Area Code & Da	ytime Telep	hone Number
Enclosed is a check	for the following a	amount made pa	yable to the Florid	a Departn	nent of State:
☑ \$35 Filing Fee	□ \$43.75 Filing Fe Certificate of St		\$43.75 Filing Fee & Certified Copy (Additional copy is er		\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		A D C	treet Address mendment Section ivision of Corpora lifton Building 561 Executive Cen	tions	

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

$\int_{\Omega} d\Omega$	of	- _	/ ^	.00
<u> </u>	156 Se	ruces	Jach	ASC ME
(Name of Corporation as cu	rrently filed with	the Florida Dept.	of State)	ALC:
<u>+0900000</u>	2842X	(*c. (*C1		A. 20
(Document N	lumber of Corpora	tion (ii known)		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
suant to the provisions of section 607.10 endment(s) to its Articles of Incorporation		ites, this <i>Florida I</i>	Profit Corporation	adopts the folk
If amending name, enter the new name	of the corporati	on:		
ne must be distinguishable and contain				The new
reviation "Corp.," "Inc.," or Co.," or t ne must contain the word "chartered," "p	orofessional assoc			onal corporation
Enter new principal office address, if a incipal office address MUST BE A STRI			· 	
meiput office unuress <u>messi bis it site.</u>	<u> </u>			
Pater and the state of the stat	.l	<u> </u>		
Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)				
				·····
If amending the registered agent and/o	r registered offic	e address in Floric	da, enter the nam	e of the
new registered agent and/or the new re	egistered office ad	ldress:		
Name of New Registered Agent:	CELSO A. C	COBOS RAMIRE	<u>Z</u>	
	15226 SW 2	21 LN		
New Registered Office Address:	(Flor	rida street address)		
	MIAMI		, Florida_	33185
	(City))	(Zip Code)	
w Registered Agent's Signature, if chan				
reby accept the appointment as registered	d agent. I am fan	iiliar with and acce	ept 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) Address Type of Action **Title** <u>Name</u> P Ana I. Ramirez 15226 SW 21 LN ☐ Add ☑ Remove MIAMI FL 33185 Ana I. Ramirez Escobar P, D Add 15226 SW 21 LN ☐ Remove MIAMI FL 33185 VΡ Celso A. Cobos 15226 SW 21 LN E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)

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>	Address	Type of Action
VP, D	Celso A. Cobos Ramirez	15226 SW 21 LN MIAMI FL 33185	☐ Add ☐ Remove
(allach aa	lditional sheets, if necessary). (Be spe	ecific)	
F. If an an	nendment provides for an exchange, r	eclassification, or cancellation	of issued shares,
provisio	ons for implementing the amendment of applicable, indicate N/A)		
·			

The date of each amend	ment(s) adoption: $\underline{0}$	8/17/2009
Effective date <u>if applical</u>		(date of adoption is required)
	(no more than	90 days after amendment file date)
Adoption of Amendmen	t(s) (<u>C</u>]	HECK ONE)
The amendment(s) wa	s/were adopted by the as/were sufficient for	e shareholders. The number of votes cast for the amendment(s) approval.
		he shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):
"The number of v	otes cast for the amer	ndment(s) was/were sufficient for approval
by		."
	(voting group)	
▼ The amendment(s) wa action was not require		e board of directors without shareholder action and shareholder
The amendment(s) wa action was not require		e incorporators without shareholder action and shareholder
Dated_	AUGUST 17, 2009	9
Signatu	re Care	
		dent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		CELOS A. COBOS RAMIREZ
	(Ty	ped or printed name of person signing)
		VICE-PRESIDEN, DIRECTOR
	(Title o	f person signing)