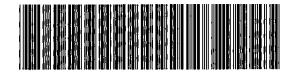
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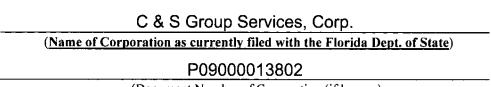
COVER LETTER

TO: Amendment Section . Division of Corporations

NAME OF CORPORATION:	C & S Group Services, Corp.		
DOCUMENT NUMBER:	R:P0900013802		
The enclosed Articles of Amendment	and fee are submitted for filing.		
Please return all correspondence conc	erning this matter to the following:		
 	Sandra Hernandez Name of Contact Person		
	South Cucous Firm/ Company		
	3119 NW 99 Place Address		
	Doral, FL 33172 City/ State and Zip Code		
E-mail address	sandrah567@gmail.com : (to be used for future annual report notification)		
For further information concerning thi	is matter, please call:		
Sandra Hernandez	at (786) 217-2772 Area Code & Daytime Telephone Number		
Name of Contact Person			
_	amount made payable to the Florida Department of State:		
☑ \$35 Filing Fee ☐ \$43.75 Filing Fe Certificate of St			
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 **Articles of Incorporation**



(Document Num	ber of Corporation (if kn	own)	
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	5, Florida Statutes, this I	Florida Profit Corporation adopts the	e follo
A. If amending name, enter the new name of	the corporation:		
		The	new
name must be distinguishable and contain to abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "prof	designation "Corp," "In	ac," or "Co". A professional corporc	
B. Enter new principal office address, if appl			
(Principal office address <u>MUST BE A STREE</u>)	TADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC			
D. If amending the registered agent and/or re		in Florida, enter the name of the	
new registered agent and/or the new regis	tered office address:		
Name of New Registered Agent:			
New Registered Office Address:	(Florida street	address)	
_		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changin I hereby accept the appointment as registered ag		and accept the obligations of the positi	ion.

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>	Address	Type of Action
V	Hernandez, Sandra	3119 NW 99 Place Doral, FL 33172	
(attach a	dditional sheets, if necessary). (Be	specific)	
provisio	nendment provides for an exchange ons for implementing the amendme ot applicable, indicate N/A)		
N/A			

The date of each amendmen	t(s) adoption: 11/26/10
Effective date <u>if applicable</u> :	11/26/10 (date of adoption is required)
	(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 and 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)
	(voining 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_11/2	26/10
Signature	a director, president or other officer – if directors or officers have not been
sele	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Sandra Hernandez
	(Typed or printed name of person signing)
	Vice-President
	(Title of person signing)