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SECRETARY OF STATE ALLAHASSEE, FLORID

5/11/09

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>CHIMIZ</u>	A USA INC.
DOCUMENT NUMBER: P090000	18925
The enclosed Articles of Amendment and fe	ee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
	FERNANDO GIL
(Na	ame of Contact Person)
	CHIMIZA USA INC.
	(Firm/ Company)
1	12 MISTYWOOD CT
	(Address)
	KISSIMMEE FL 34743
(Cit	ty/ State and Zip Code)
For further information concerning this mat	ter, please call:
PEDRO A. RIVERA	at (321) 682-0288
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	nt made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

09 MAY 11 PH 1:56

CHIMIZA USA INC	C. 1	SEURETARY OF STATE ALLAHASSEE FLORID
(Name of Corporation as currently filed with the	<u>ne Florida Dept.</u>	of State)
P09000018925		
(Document Number of Corporation	on (if known)	_
rsuant to the provisions of section 607.1006, Florida Statute lowing amendment(s) to its Articles of Incorporation:	es, this <i>Florida I</i>	Profit Corporation adopts the
If amending name, enter the new name of the corporation	<u>:</u>	
e new name must be distinguishable and contain the ecorporated" or the abbreviation "Corp.," "Inc.," or Co., o". A professional corporation name must contain ociation," or the abbreviation "P.A."	" or the designa	tion "Corp," "Inc," or
Enter new principal office address, if applicable: incipal office address <u>MUST BE A STREET ADDRESS</u>)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registered office new registered agent and/or the new registered office add		la, enter the name of the
Name of New Registered Agent:	1035.	
New Registered Office Address: (Florid	da street address)	
		, Florida
	(City)	(Zip Code)
w Registered Agent's Signature, if changing Registered Agent		
ereby accept the appointment as registered agent. I am j		l accept the obligations of t
sition.		

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
D	C.I. CHIMIZA LTDA	CALLE 56 #36A-09 BOGOTA COLOMBIA	☑ Add ☐ Remove
<u>D</u>	LUZ MIRIAM GIL		Add Remove
D	MARITZA MARTINEZ		☑ Add □ Remove
	g or adding additional Articles, enter tional sheets, if necessary). (Be specif		
provision	ndment provides for an exchange, recl s for implementing the amendment if a applicable, indicate N/A)		
			<u></u>

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
<u>D</u>	PEDRO A. RIVERA	203 W SPROULE AVE	
		KISSIMMEE, FL 34741	Remove
			
			☑ Add
			"
E. If amer	nding or adding additional Articles, eadditional sheets, if necessary). (Be.	enter change(s) here:	
(anach t	auattional sheets, if necessary). (Be.	specific)	
		<u> </u>	
			
	mendment provides for an exchange		
	ions for implementing the amendme not applicable, indicate N/A)	ent if not contained in the amendm	ent itself:
(0)	noi applicable, indicate (VA)		
			
			
		·	

Th	date of each amendment(s) adoption: APRIL 13, 2009
Efi	ective date if applicable: APRIL 13, 2009
	(no more than 90 days after amendment file date)
Ad	option of Amendment(s) (CHECK ONE)
☑	The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(by the shareholders was/were sufficient for approval.
	The amendment(s) was/were approved by the shareholders through voting groups. The following statements that the separately provided 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"
	by
u	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required.
	The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
	Dated 04/13/2009 Signature
	(By a director, president of other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	FERNANDO GIL
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)