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## **COVER LETTER**

\* TO: Amendment Section Division of Corporations

NAME OF CO	RPORATION: <u>RWA BUSI</u>	NESS INVESTMENTS	CORP
DOCUMENT I	NUMBER: <u>P09000021</u>	932	
The enclosed A	rticles of Amendment and fee a	re submitted for filing.	
Please return all	correspondence concerning thi	s matter to the following:	
_		LLY CADAGAN of Contact Person)	
	(Name	i Contact Person)	
	RWA BUSI	NESS INVESTMENTS CORP	
<del></del>	(Fir	m/ Company)	
_		TE ROAD 7 SUITE 221	
		(Address)	
	FORT LAUDE	ERDALE, FLORIDA 33319	
8: 00 TATE ORIDA		ate and Zip Code)	
8 28	4.	-1	
ese. ( ) .	rmation concerning this matter,	piease can.	
是 <del>2</del>			
L 0€ NEEL CADAGA	AN	at ( <u>954</u> ) <u>739-481</u> 0	
S. A. A. (N	ame of Contact Person)	· (Area Code & Daytime	Telephone Number)
2009 MAR 24 CHO	neck for the following amount n	nade payable to the Florida De	partment of State:
<b>✓</b> \$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	Street Address	
	ment Section	Amendment Section	
	of Corporations	Division of Corporations	
P.O. Bo		Clifton Building	
Tallahas	ssee, FL 32314	2661 Executive Center C	ircle
		Tallahassee, FL 32301	

## Articles of Amendment to Articles of Incorporation

7111	of		P
RWA BUSINES			6
(Name of Corporation as curr	rently filed with t	he Florida Dept. of St	<u>ate</u> ) ,
	000021932 mber of Corporati		
rsuant to the provisions of section 607.100 llowing amendment(s) to its Articles of Inco		es, this <i>Florida Profi</i>	t Corporation adopts
. If amending name, enter the new name of	of the corporation	<u>ı:</u>	
N/A			
he new name must be distinguishable of incorporated" or the abbreviation "Corp.," Co". A professional corporation nan ssociation," or the abbreviation "P.A."	" "Inc.," or Co.,	" or the designation	"Corp," "Inc," or
Enter new principal office address, if ap Principal office address <u>MUST BE A STRE</u>	<u>plicable:</u> ET ADDRESS )	N/A	
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		N/A	
If amending the registered agent and/or new registered agent and/or the new reg			nter the name of the
Name of New Registered Agent:	N/A		
	(Flori	da street address)	
New Registered Office Address:	(1 10/1	,	
New Registered Office Address:		(City)	, Florida (Zip Code)

Signature of New Registered Agent, if changing

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)

<u>Title</u>	Name	Address	Type of Action
D	ANA MARIA CUCCURULLO A	7650 W. MC NAB RD TAMARAC/ FLORIDA, 33321	☐ Add ☐ Remove
			Add Remove
			Add Remove
N/A	ional sheets, if necessary). (Be specific		
provisions	ndment provides for an exchange, recla for implementing the amendment if napplicable, indicate N/A)	assification, or cancellation of issot contained in the amendment	sued shares, itself:
N/A			

The date of each amendmen	t(s) adoption: 03/10/2009 .
· · · · · · · · · · · · · · · · · · ·	04/01/2009
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	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	
	(voting group)
The amendment(s) was/wa action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/waction was not required.	ere adopted by the incorporators without shareholder action and shareholder .
Dated_03/1	0/2009
Signature _	(Radaliania)
se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	RAFAEL R. GUDIÑO R
	(Typed or printed name of person signing)
	DIRECTOR
	(Title of person signing)