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ALL AHASSEE, FLORIDA.

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	E VALDES GROUP CORP
DOCUMENT NUMBER: Po 9	0000 27034
The enclosed Articles of Amendment and	fee are submitted for filing.
Please return all correspondence concerni	ng this matter to the following:
Jusim	VALUES
	Name of Contact Person)
	(Firm/ Company)
5030	SW 115 AUC.
	(Address)
Mifmi	Al. 33165
For further information concerning this m	City/ State and Zip Code) atter, please call:
(Name of Contact Person)	at (186) 457 1209 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amo	ount made payable to the Florida Department of State:
\$35 Filing Fee \$\times \text{Certificate of Status}\$	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) 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

	Artic	les of Incorpora	ition
THE	VALSES	GROUP	(DRP

(Name of Corporation as cu	urrently filed with the Florida Dept. of Sta	te)
P0900	XX 21034	<u></u>
(Document N	Number of Corporation (if known)	
Pursuant to the provisions of section 607. following amendment(s) to its Articles of Inc.		Corporation adopts the
A. If amending name, enter the new name	e of the corporation:	
"incorporated" or the abbreviation "Corp	and contain the word "corporation," o.," "Inc.," or Co.," or the designation "came must contain the word "chartered	Corp," "Inc," or l," "professional
B. Enter new principal office address, if a		AR R
(Principal office address <u>MUST BE A STR</u>	EET ADDRESS)	SS 29
		35 A
C. Enter new mailing address, if application (Mailing address MAY BE A POST OF		ŽÃ Å
(Mutting dataless MAT BE AT UST OF	TICE BOX)	
		
D. If amending the registered agent and/o	or registered office address in Florida, ent	er the name of the
new registered agent and/or the new r		or the name or the
Name of New Registered Agent:		
		_
New Registered Office Address:	(Florida street address)	_
		_, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if char I hereby accept the appointment as registed position.	nging Registered Agent: ered agent. I am familiar with and accep	of the obligations of the
-	Signature of New Registered Agent, if cha	enging

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)

Title MANAGER	Carlos A. Valdes	Address 5030 SW 115 Ave MIMMI FL =33165	Type of Action Add Remove
			Add Remove
			Add Remove
	ng or adding additional Articles, enter itional sheets, if necessary). (Be specif		
provision	endment provides for an exchange, recl s for implementing the amendment if a applicable, indicate N/A)		

Ţĥ	e date of each amendment() adoption: 4/27/09
Efi	fective date <u>if applicable</u> :	4/27/09
		(no more than 90 days after amendment file date)
Ad	loption of Amendment(s)	(CHECK ONE)
	The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
		approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
	"The number of votes c	st for the amendment(s) was/were sufficient for approval
	by	voting group)
	1	voting group)
	The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
(1)	The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
	Dated	4/27/09 ALMAN
		by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
		Jusin VALDES
		(Typed or printed name of person signing)
		DRESIDENT
		(Title of person signing)