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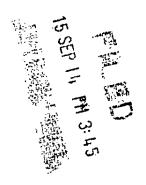
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COVER LETTER

Division of Cor			
NAME OF CORPO	ORATION: KAF RECYCLING	G CORP	
DOCUMENT NUMBER: P09000049247			
The enclosed Article	s of Amendment and fee are su	bmitted for filing,	
Please return all corr	espondence concerning this mat	tter to the following:	
	YOSVANY GONZALEZ		
		Name of Contact Person	1
		Firm/ Company	
	1650 West 72 sT		
		Address	
	Hialeah, Fl 33014		
		City/ State and Zip Code	e
vul	y1781@yahoo.com		
	· · · · · · · · · · · · · · · · · · ·	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
YOSVANY GONZ	ALEZ	786 at (de & Daytime Telephone Number
Name	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
M	ailing Address	<u>Street</u>	Address
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
	O. Box 6327		Building
Tallahassee, FL 32314		2001 E	Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



KAF RECYCLING CORP

(Name of Corporation	on as currently filed with the Florida Dept. of State)		بن
P09000049247			الله
(Docum	nent Number of Corporation (it known)	, and	
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the follow	ving amendme	ent(s) to
A. If amending name, enter the new name of the co	rporation:		
		The nev	1'
	d "corporation," "company," or "incorporated" or the ""Inc," or "Co". A professional corporation name mu abbreviation "P.A."		
B. Enter new principal office address, if applicable			
(Principal office address <u>MUST BE A STREET ADD</u>	ORESS)		
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BO.</u>	<u></u>		
 If amending the registered agent and/or registered new registered agent and/or the new registered 			
Name of New Registered Agent			
ivame of ven Registerea ingen			
	(Florida street address)		
New Registered Office Address:		Zip Code)	
New Registered Agent's Signature, if changing Reg			
i nereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the positio	n.	
Sian	cature 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary: D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer: CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	JOSE P. ACOSTA	6161 W 14 CT
X Add			HIALEAH, FL 33014
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
,	

09/05/2015	
	, if other than the
date this document was signed.	
09/05/2015	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be 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" (voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
09/05/2015	
Dated	
11/1	
Signature () ()	
(By a director, president or other officer – if directors or officers have not been	
selected, by in incorporator – if in the hands of a receiver, trustee, or other court	
appointed induciary by that fiduciary)	
YOSVANY GONZALEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	