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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	HERCAT EXPRESS SPA	CORP		
DOCUMENT N	UMBER:	P09000060411			
The enclosed Arts	icles of Amendment and fee a	re submitted for filing.			
Please return all correspondence concerning this matter to the following:					
ROSA A. HERNANDEZ					
Name of Contact Person					
HERCAT EXPRESS SPA CORP					
	Firm/ Company				
	17171 PEMBROKE PINES BLVD (INSIDE SEDANO'S SUPERMA				
Address					
PEMBROKE PINE, FL 33027					
City/ State and Zip Code					
RODOYROSA@HOTMAIL.COM E-mail address: (to be used for future annual report notification)					
For first and inform		1			
	nation concerning this matter,		. 7507		
ROSA A. HERNANDEZ Name of Contact Person		at (954) 43 Area Code & Daytime Tele			
Enclosed is a chec	k for the following amount m	ade payable to the Florida Departs	•		
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	✓ \$43.75 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**

HERCAT EXPRESS SPA CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P09000060411

	/00000 0 1		344
(Document Nur	mber of Corporation (if known	own)	
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this <i>I</i>	Ilorida Profit Corporation a	idopts the fo
A. If amending name, enter the new name o	f the corporation:		
			The nev
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "Corp," "In	c," or "Co". A professiona	rated" or the ul corporation
3. Enter new principal office address, if app Principal office address <u>MUST BE A STREE</u>			
•			
C. Enter new mailing address, if applicable	<u></u>		
(Mailing address MAY BE A POST OFFI			
			<u>—</u>
D. If amending the registered agent and/or r		n Florida, enter the name o	of the
new registered agent and/or the new regis	stered office address:		
Name of New Registered Agent:			
New Registered Office Address:	(Florida street d	address)	
		, Florida	
	(City)	(Zip Code)	
ew Registered Agent's Signature, if changir	ng Registered Agent:		
hereby accept the appointment as registered a	gent. I am familiar with a	and accept the obligations of	the position.
<u> </u>		 	
C C	iomature of New Peristers	d Account if chancing	

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) **Title** <u>Name</u> **Address** Type of Action **MGRM** RODOLFO HERNANDEZ 17171 PEMBROKE PINES BLV ☑ Add ☐ Remove (INSIDE SEDANO'S SUPERMI PEMBROKE PINES, FL 33027 ☐ Remove _____ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendmen	t(s) adoption: 09/12/2011
Effective date if applicable:	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	are 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)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder 2/2011
Signature	Rosa Kernaude
(By sele	a director, president or other officer <u>if directors</u> or officers have not been cted, by an incorporator <u>if in the hands of a receiver, trustee</u> , or other court ointed fiduciary by that fiduciary)
	ROSA A HERNANDEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)
	JOCELYN ALMONTE MY COMMISSION # DD 931361 EXPIRES: October 31, 2013 Bonded Thru Notary Public Underwriters