## P090000003383

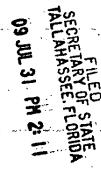
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EFFECTIVE DATE
8/1/2009

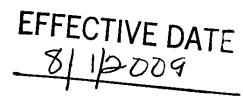
Amend 109

## **COVER LETTER**

**TO:** Amendment Section

Division of Corporations
NAME OF CORPORATION: FONT NATURA, INC.
DOCUMENT NUMBER: PO900063383
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SALVADOR FRAZZETTA  Name of Contact Person
FY TNTERNATIONAL, LLC Firm/ Company
6205 BLUE LAGOON Dr. StE. 130.
MiAMI, FL 33126  City/ State and Zip Code
SFRAZZETTA® FYINTERNATIONAL · COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SALVADOR FRAZZETTA at ( 786 ) 272-7030  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & Certificate of Status \$\b
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



	TURA, INC.		
(Name of Corporation as curre	ently filed with the Florida	Dept. of State)	
P090C	XXX 63383		
(Document Num	nber of Corporation (if know	vn)	
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	5, Florida Statutes, this Flo	orida Profit Corporation adop	ots the following
A. If amending name, enter the new name of	f the corporation:	•	
			_The_new
name must be distinguishable and contain to abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "programme must contain the word "chartered," "programme must contain the word "chartered,"	designation "Corp." "Inc,	" or "Co". A professional co	d" or the orporation
B. Enter new principal office address, if app			
(Principal office address MUST BE A STREE	T ADDRESS )		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u></u>		SECRETARSSEE, FLOR
D. If amending the registered agent and/or r new registered agent and/or the new regis		Florida, enter the name of th	<u>1e</u>
Name of New Registered Agent:			•
New Registered Office Address:	(Florida street ac	ddress)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a	gent. I am familiar with ar		position.
C	ignature of New Pagistared	Agant 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>	<u>Address</u>	Type of Action
<u>5D</u>	KARINA LABOLLITA	6206 Bluelagon Dr. STE 130 MIATI FC 33176	☐ Add ☐ Remove
MD_	RAFAEL A. MENDIBLE	6705 Blue Lagoon Dx 5te 130 5710711, 7L 33126	Add ☐ Remove
<del></del>			Add Remove
E. <u>If amen</u> (attach a	ding or adding additional Articles, enter	<u>change(s) here</u> : fic)	
	•		
<del></del>		10 <del>-111</del>	
provisi	mendment provides for an exchange, reconst for implementing the amendment if not applicable, indicate N/A)		
	-		

The date of each amendment(s) adoption: 4 128 12009
(date of adoption is required)  Effective date if applicable: 8/1/2009
(no more than 90 days after amendment file date)
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"
(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.
Dated
Signature  (By a director, president or 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)
(Typed or printed name of person signing)
TWORPORATOR (Title of person signing)