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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : AYAN ENTERPRISES, INC. DBA THE INNER CIRCLE
Account Number : I20010000223
Phone : (305) 262-1128
Fax Number : (305) 262-6935

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

RECEIVED
2009 DEC 10 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COR AMND/RESTATE/CORRECT OR O/D RESIGN
EXPRESS FACTORING CORP

Certificate of Status	0
Certified Copy	0
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09 DEC 10 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: EXPRESS FACTORING CORP

DOCUMENT NUMBER: P09000073171

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carlos Blanco

(Name of Contact Person)

EXPRESS FACTORING CORP

(Firm/ Company)

1705 SW 83 Ct

(Address)

MIAMI, FL 33155

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Carlos Blanco

(Name of Contact Person)

at (786) 339-0931

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$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
409 E. Gaines Street
Tallahassee, FL 32399

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Articles of Amendment
to
Articles of Incorporation
of

EXPRESS FACTORING CORP

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

P09000073171

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

Change mailing Address to: 318 Indian Trace, Ste 147. Weston, FL 33326

Change Principal Address to: 318 Indian Trace, Ste 147. Weston, FL 33326

(Attach additional pages if necessary)

If an amendment provides for 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)

(continued)

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The date of each amendment(s) adoption: 12/1/09

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- The amendment(s) was/were approved 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.

Signed this 8 day of Dec, 2009

Signature Ligia Zuluaga
(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)

Ligia Zuluaga
(Typed or printed name of person signing)

President
(Title of person signing)

FILING FEE: \$35

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