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COVER LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

NAME OF CORI	PORATION:	Jimmy Vee Inc	
DOCUMENT NU	MBÈR:	P10000001003	<u> </u>
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
		Jimmy Vega	
	r	Name of Contact Person	
		Firm/ Company	
		14800 sw 57 terr	*****
		Address	
		Miami FI 33193 City/ State and Zip Code	
<u></u>	capri	12ram@aol.com ad for future annual report notification)	
	E-mail address: (to be use	ed for future annual report notification)	
For further informa	ation concerning this matter,	please call:	
	Jimmy Vega		9034055
Name	of Contact Person	Area Code & Daytime To	elephone Number
Enclosed is a check	k for the following amount r	nade payable to the Florida Depa	rtment of State:
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fce Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ao Amendmer Division of P.O. Box 6	at Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of	10 FED
Jimmy Vee Inc (Name of Corporation as currently filed with the Florida Dep P1000001003	10 FEB 11 PM 3: 50
(Name of Corporation as currently filed with the Florida Dep	ot. of State) AHACAY OF CTA
P1000001003	SEE. FLORIDA
(Document Number of Corporation (if known)	

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following

	Jimi Vee Inc.	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "pi	he designation "Corp," "Inc," or "C	o". A professional corporation
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		
D. If amending the registered agent and/or new registered agent and/or the new registered agent and/or new registered agent ag		, enter the name of the
		, enter the name of the
new registered agent and/or the new re-		enter the name of the
Name of New Registered Agent:	gistered office address:	, Florida, <i>Zip Code</i>)

If amending the Officers and/or Directors, enter the title and name of each officer/director being removad 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
			
			Remove
**************************************		-	
	ding or adding additional Articles, e dditional sheets, if necessary). (Be s		
			
 			
<u> </u>			
<u>provisi</u>	mendment provides for an exchange ons for implementing the amendmen		
(if n	not applicable, indicate N/A)		
			
			

The date of each amendmen	it(s) adoption: 1/13/10
Effective date <u>if applicable</u> :	1/13/10 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	", ———•
•	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_ 1/1:	3/10
Signature _	Samuel Select
(B	y a director president or other officer - if directors or officers have not been
sel	ected, by an incorporator — if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
ар) /	formed hoderary by that inductary)
	lineary F. Manage
	Jimmy F. Vega
	(Typed or printed name of person signing)
	President
	(Title of person signing)