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(Ac	idress)	
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(Ci	ty/State/Zip/Phone	e #)
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And

JAN 07 2015 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA DOCUMENT NUMBE	CLP INVESTA	TMENTS MANAG 447	SEMENT INC.
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
E	Brian C. Perlin		
_		Name of Contact Person	1
L	aw Office of E	Brian C. Perlin	, P.A
_		Firm/ Company	
2	01 Alhambra	Circle, Suite 5	503
		Address	
C	Coral Gables,	Florida 33134	
		City/ State and Zip Code	
Bria	n@perlinestat	eplanning.cor	n
		ed for future annual report	
For further information c	oncerning this matter, pleas	e call:	
Heidi Whitfo	rd	_{**.} 352	2830535
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	ne following amount made p	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 Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ameno Divisio P.O. B	g Address Iment Section on of Corporations ox 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

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CLP INVESTMENTS MANAGEMENT INC.

(Name of Corporation as currently filed with the Florida Dept. of State)
P1000015447

MODIFICATION OF STATES TALLARASSES, FLORMA

(Document Number of Corporation (i	if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
N/A	TI.
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation "	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amounting the society of a society of the soc	
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	ress in Florida, enter the name of the
Name of New Registered Agent Brian C. Perlin	-
201 Alhambra Cir	rcle, Suite 503
(Florida stre	eet address)
New Registered Office Address: Coral Gables	, Florida 33134
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w Signature of New Registered A	vith and accept the obligations of the position.

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P/D	Michael S. Liberman	844 Belle Meade Island Dr.
Add Add			Miami, Florida 33138
Remove			
2) Change	P/D	Heidi Whitford	844 Belle Meade Island Dr.
Add			Miami, Florida 33138
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	Attach addition	nal sheets, if necessary). (Be specific)	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	Α		
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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) A			
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)			
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	provisions for (if not app	implementing the amendment if not contained in the amendment itself:	res,
			······································

The date of each amendment(s) adoption: December 31, 2014	_, if other than the
date this document was signed.	
Effective date if applicable: December 31, 2014	
(no more than 90 days after amendment file date)	
Adoption of Amondments (CITECIA ONE)	
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)	
(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 Clicki White Hills	_
(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)	
Heidi Whitford	
(Typed or printed name of person signing)	

Personal Representative of the Estate of Michael S. Liberma (Title of person signing)