P10000011915

| · (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| · (Ac | ldress) | |
| (Ac | ldress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | isiness Entity Nar | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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FILED SECRETARY OF STATE TALLAHASSEE. FLORIDA

Ahund 10,5,3,10

COVER LETTER

TO: Amendment Section

| Division of Corporations | |
|---|--|
| NAME OF CORPORATION: FIMA REALTY INC | |
| DOCUMENT NUMBER: P10000017915 | |
| The enclosed Articles of Amendment and fee are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | |
| Johanna Posada | |
| Name of Contact Person | |
| FIMA Realty, INC | |
| Firm/ Company | |
| 2655 Le Jeune Rd +411 | |
| Address | |
| Coral Gables FL 33134 City/ State and Zip Code | |
| | |
| E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| Johanna Posada at 786, 397-2151 | |
| 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 \$\times \text{S43.75 Filing Fee & Certificate of Status}\$\$ Certificate of Status (Additional copy is enclosed) \$\times \text{S2.50 Filing Fee & Certificate of Status}\$\$ Certified Copy (Additional Copy is enclosed) | |
| Mailing Address Street Address | |
| Amendment Section Amendment Section Division of Corporations Division of Corporations | |
| P.O. Box 6327 Clifton Building | |
| Tallahassee, FL 32314 2661 Executive Center Circle | |

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

FIMA REALTY, INC

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

P10000017915

(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:

| e must be distinguishable and contain reviation "Corp.," "Inc.," or Co.," or the must contain the word "chartered," "pro | designation "Corp," "Inc," or "C | o". A professional corp |
|--|---|--------------------------|
| Enter new principal office address, if app ncipal office address MUST BE A STREE | | |
| teput office unit case and a second | | |
| | | |
| Enter new mailing address, if applicable | • | |
| (Mailing address MAY BE A POST OFFI | | |
| (Mailing address <u>MAY BE A POST OFFI</u> | | |
| , | <u>CE BOX</u>) | |
| (Mailing address MAY BE A POST OFFICE If amending the registered agent and/or received agent and/or received agent and/or the new registered agent and/or the | CE BOX) registered office address in Florida | , enter the name of the |
| If amending the registered agent and/or 1 | CE BOX) registered office address in Florida | ı, enter the name of the |
| If amending the registered agent and/or new registered agent and/or the new reginates the new reginates of New Registered Agent: | registered office address in Florida | enter the name of the |
| If amending the registered agent and/or notes that the new registered agent and/or the new registered agent | CE BOX) registered office address in Florida | enter the name of the |
| If amending the registered agent and/or new registered agent and/or the new reginates the new reginates of New Registered Agent: | registered office address in Florida | , Florida |

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> | Name | | Address | Type of Action |
|--------------|-------------------------|---|---|----------------|
| DIVECTOR | Orlando | Norena # | Address 2655 Le Jeune 411 Coral Gabte Florida 33134 | Add , Remove |
| | | | | |
| | | | | |
| | ional sheets, if necess | | | |
| F If an amen | dment provides for | an eychange recla | ssification, or cancellation of | issued shares |
| provisions | | e amendment if no | t contained in the amendmen | |
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| 、. The date of each amendment | (date of adoption is required) |
|--|---|
| | (date of adoption is required) |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) |
| The amendment(s) was/we by the shareholders was/we | re 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 of 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/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 | |
| sele | a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) |
| | Karen Massard |
| | (Typed or printed name of person signing) |
| | P |
| | (Title of person signing) |