Electronic Filing Cover Sheet
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(((H14000218386 3)))
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To: Division of Corporations Fax Number : (850)617-6380
From: Account Name : PRONTO TAX & ACCOUNTING SERVICES, INC Account Number : I20090000095 Phone : (305)267-1092 Fax Number : (305)267-2819
*Enter the email address for this business entity to be used for future *Enter the email address for this business entity to be used for future *Enter address please.**
COR AMND/RESTATE/CORRECT OR O/D RESIGN OXICUT US, CORP
Certificate of Status0Certified Copy0Page Count04Estimated Charge\$35.00

https://efile.sunhiz.org/scripts/efilcovr.exe

SEP 1 8 2014

C. CARROTHERS

9/17/2014

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09/17/2014 10:53 3052672819	PRONTO INCOME T	AX PAGE 02/05
• (((H 140)00218386 3)))	FILED
	Articles of Amendment	14 SEP 17 AM 9: 11
	to Articles of Incorporation	
	of	SECTE LARY OF STATE
OXICUT US, CORP		
	ently filed with the Florida Dept. of State)	,
P1000020763	has a figure and the definition of the	
•	nber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Floridu Profit Corporation	n adopts the following amendment(s) to
A. If amending name, enter the new name of	f the corporation:	
		The new
name must be distinguishable and contain to "Curp" "Inc.," or Co.," or the designation word "chartered," "professional association,"	he word "corporation," "company," or "inco "Corp," "Inc," or "Co". A professional corp or the abbreviation "P.A."	prporated" or the abbreviation poration name must contain the
B. <u>Enter new principal office address, if app</u> (Principal office address <u>MUST BE A STREE</u>		· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable (Mailing uddress <u>MAY BE A POST OFFI</u>		
D. <u>If amending the registered agent and/or in new registered agent and/or the new regionant of New Registered Agent</u>	registered office address in Florida, enter the istered office address:	name of the
	(Florida street address)	
<u>New Registered Office Address:</u>	. Flor	ida .
The Merice Unite numero.	(City)	(Zip Code)
<u>New Registered Agent's Signature, if changi</u> I hereby accept the appointment as registered a	ng Registered Agent: ogent. I am familiar with and accept the obligat	ions of the position.
Signatu	re of New Registered Agens, If changing	—
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	Page 1 of 4	

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3052672819 PRONTO INCOME TAX 09/17/2014 10:53 PAGE 03/05 //(H14000218386 3

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)

Promotes

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.

X Change	<u>PT</u>	<u>John Doe</u>	
X Remove	У	Mike Jones	
Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	DIEGO A VIERMA CHATA	1721 Ponce De Leon BLVD
Add			Coral Gables, FL 33134
Remove			
2) Change	VP	Isabel A. Paredes Silva	1721 Ponce De Leon BLVD
Add			Coral Gables, FL 33134
Remove			
3) Change			
Add			·····
Remove			
4) Change		·	
Add			·
Remove			
5) Change			
Add			
Remove			<u>_</u>
6) Change			
Add			
Remove			

Page 2 of 4

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E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment liself: (if not applicable, indicate N/A)

. . .

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DIMAS E, PAREDES BERMUDEZ - 70% SHARES

ISABEL A. PAREDES SILVA - 30% SHARES

Page 3 of 4

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	· .		· ·	·
· · ·			•	•
The date of each amendment(s) date this document was signed.	ndoption: SEPTEMBER 9	2014	,,,,,,,,,,,	if other than the
·· · · · ·	SEPTEMBER 9, 2014			
Effective date if applicable:		deva after amendment file di		
			·	•
Adoption of Amendment(s)	(CHECK ONE)			- · ·
The amendmont(s) was/were	adopted by the shmeholders. The n	umber of votes cast for the a	imendment(s)	•
by the shareholders was/were			•••	·· ·
	approved by the shareholders throu			
	for each voting group entitled to vo			
"The number of votes a	ast for the amendment(s) was/were	sufficient for approval		
by	·		· · ·	
	(voting group)		· 2	
	adopted by the board of directors w	vithout shareholder action an	d shareholder	
action was not required.				,
	adopted by the incorporators without	ut shareholder action and shi	reholder	÷ .
action was not required.	· · · ·	• •		· .
Dated SEPT	EMBER 9, 2014	· · ·		
· · · · · ·	De Rea	· · ·	·	•,
	IPHAS THENES	- if directors or officers ha	ve ant hive	
sele	cted, by an incorporator - if in the i sinted fiduciary by that fiduciary)	hands of a receiver, trustee, t	r other court	
	DIMAS E. PAREDES B	ERMUDEZ		
· .	(Typed or pri	nted name of person signing	,	
	PRESIDENT			•••
	· · · · · · · · · · · · · · · · · · ·	of person signing)	·····	
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