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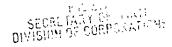
04/06/15--01044--021 **35.00

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: TWO STA	ARS TRAFFIC	CINC	
DOCUMENT NUMBER: P10000032			
The enclosed Articles of Amendment and fee are su	ibmitted for filing.		
Please return all correspondence concerning this ma	itter to the following:		
JOHAN RODE	RIGUEZ		
TWO STARS	Name of Contact Person	n	
40. 07 NW 7 S	Firm/ Company		
40. 07 NVV 7 S	Address		
MIAMI, FL 331			
	City/ State and Zip Cod	e	
gnggservices@ya			
E-mail address: (to be u	sed for future annual report	notification)	
For further information concerning this matter, pleas	se cail:		
JOHAN RODRIGUEZ	_{at (} 786	,4192465	
Name of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State	
■ \$35 Filing Fee	□\$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	Amend Division Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301	

Articles of Amendment to **Articles of Incorporation**



TWO STARS TRAFFIC INC

15 APR -6 PM 3: 08

(Name of Corporation as currently filed with the Florida Dept. of State) P1000032807

F 10000032031				
(Document Number of C	Corporation (if k	nown)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this <i>FI</i>	orida Profit Corpoi	ration adopts the	following amendment
A. If amending name, enter the new name of the cor	poration:			
				The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp., word "chartered," "professional association," or the a	" "Inc." or "Co	". A professional	'incorporated'' corporation na	or the abbreviation
B. Enter new principal office address, if applicable:				
(Principal office address MUST BE A STREET ADDI				
C. Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	ý.			
D. If amending the registered agent and/or registered new registered agent and/or the new registered o		<u>s in Florida, enter</u>	the name of the	•
Name of New Registered Agent				
	(Florida street			
	(r torida street	aaaress)		
New Registered Office Address:	(City)		Florida	Code)
	(City)		(Zip	Couey
New Registered Agent's Signature, if changing Regis	stered Agent:			
I hereby accept the appointment as registered agent. 1	am familiar wit	h and accept the ob	ligations of the p	osition.
0.	· · ·			
Signature of New	· Registered Age	out if changing		

Signature of New Registered Agent, if changing

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 Doc			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Change	VP	ARE	LIS PAL	9800 WEST BAYHARBOR	
Add				DR 511	
Remove				MIAMI BEACH, FL 33154	
2) Change	VP	LIAN	ET PERELLO	9800 WEST BAYHARBOR	
Add				DR 511	
Remove				MIAMI BEACH, FL 33154	
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
	745,
	The state of the s
,	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(i) not approudle, maleule (MA)	

<u> </u>	

The date of each amendmen	t(s) adoption: 04/01/2015	SECSULARY OF DURING HIS of other t	than the
date this document was signed Effective date if applicable:	04/01/2015	15 APR -6 PM 3: 08	
	(no more than 90 da	ys after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The nur ere sufficient for approval.	nber of votes east for the amendment(s)	
	re approved by the shareholders through ed for each voting group entitled to vote	voting groups. The following statement separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were su	Ticient for approval	
by 100 %		," 	
	(voting group)		
The amendment(s) was/we action was not required.	re adopted by the board of directors with	out shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without	shareholder action and shareholder	
Dated APF Signature	RIL 1ST-2015	_	
(I	by a director, president or other officer – elected, by an incorporator – if in the har ppointed fiduciary by that fiduciary)	of directors or officers have not been ads of a receiver, trustee, or other court	
	Johann Roder (Typed or printe	gwoz formula name of person signing)	
	Pre	sibent.	
	(Title of	person signing)	