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(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	2011 MAR 16 PH 12: 06 SEBRETARY PROTECTE TALLAHASSEE, FLORIDA		

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORI	PORATION:	YPUS	CORP.	
DOCUMENT NU	MBER: P 10	000032	209	
The enclosed Artic	cles of Amendment and fee a	are submitted for f	ĭling.	
Please return all co	orrespondence concerning th	is matter to the fo	llowing:	
	MERINO	Name of Contact Person	4.5 5 on	
	K	Firm/ Company	orf.	
		Firm/ Company		
	201 S. BIE	Address	BLUB. =	# 905
	MIAMI	FC 3	3/3(de	
	E-mail address: (to be use	ed for future annual re	eport notification)	
For further inform	ation concerning this matter,	please call:		
	of Contact Person	•	3 7 91. Code & Daytime Tele	Phone Number
Enclosed is a chec	k for the following amount r	nade payable to th	e Florida Depart	ment of State:
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filin Certified C (Additional		☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing A Amendmen Division of	nt Section f Corporations	Street Add Amendment Division of Clifton Buil	Section Corporations	•

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

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2011 MAD .
2011 MAR 16 PM 12: 06
ALLAH ARY STATES
ASSEE, FLORIDA

lowing

(Document N	lumber of Corporation (if know	n)
Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporation		orida Profit Corporation adopts the following
A. If amending name, enter the new name	e of the corporation:	
		The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "	the designation "Corp," "Inc,	" or "Co". A professional corporation
B. Enter new principal office address, if a	pplicable:	
(Principal office address MUST BE A STR.		
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF		
D. If amending the registered agent and/o new registered agent and/or the new re		Florida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street ac	ddress
New Registered Office Address.	(1 toriau sir cer at	44 C33)
	- C:- \	, Florida (Zip Code)
	(City)	(Zip Coae)
New Registered Agent's Signature, if char	nging Registered Agent:	
I hereby accept the appointment as registere	ed agent. I am familiar with ar	nd accept the obligations of the position.
-	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)

<u>Title</u>	Name	Address	Type of Action
VP	ALVAREZ, ROBERTO	201 S-BISCAYNE BU 905 MIAMI FL 33131	Add Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
	ding or adding additional Articles, enter c dditional sheets, if necessary). (Be specific		
proviși	mendment provides for an exchange, recla ons for implementing the amendment if no not applicable, indicate N/A)		

The date of each amendmen	t(s) adoption:	MA	RCH 3.	2011	
Effective date <u>if applicable</u> :	(no more than 9	00 days after a	mendment file (late)	
Adoption of Amendment(s)	(<u>CH</u>	IECK ONE)			
The amendment(s) was/we by the shareholders was/w	ere adopted by the ere sufficient for	shareholders.	The number o	f votes cast fo	r the amendment(s
The amendment(s) was/we must be separately provide					
"The number of votes	cast for the amen	dment(s) was	were sufficient	for approval	
by	(voting group)				
	(voting group)				
The amendment(s) was/we action was not required. The amendment(s) was/we					
action was not required.					
Dated	de ah 3 2	0//			
(Bg	a director, presidected, by an incor	dent or other o	officer – if direc		
	pointed fiduciary	•		receiver, music	se, or other court
	DU 64	AS 5.	Merpin I name of perso	40	
	(Ту	ped or printed	I name of perso	n signing)	
		- 5/00			
	(Title o	of person signi	ng)		