P100003305

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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	_{TION:} TOWSAFE	OF AMERICA (CORP
	E P1000003830		
	A <i>mendment</i> and fee are su		
Please return all correspon	ndence concerning this made	tter to the following:	
D	ANIEL CABREF	RA	
		Name of Contact Person	1
T	OWSAFE OF A	MERICA CORP	
		Firm/ Company	
1;	3260 IMMOKAL	EE RD, # 6-106	
		Address	
N	APLES, FL 341	20	
		City/ State and Zip Code	2
danie	l@towsafe.com	1	
- danie		ed for future annual report	notification)
			,
For further information co	oncerning this matter, pleas	e call:	
DANIEL CABR	FRA	at (239	、601-0566
	Contact Person)
Enclosed is a check for th	e following amount made p	payable to the Florida Depa	urtment 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)
Amendi Division P.O. Bo	e Address ment Section to of Corporations ox 6327 ssee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Bassee, FL 32301

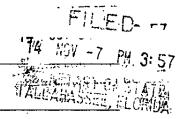
Articles of Amendment to Articles of Incorporation of

TOWSAFE OF AMERICA CORP

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

P10000038305

(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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: MARION CABRERA Name of New Registered Agent 13260 IMMOKALEE RD, STE 6-106 (Florida street address) Florida 34120 (Zip Code) NAPLES New Registered Office Address: (City)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and 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)

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	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CEO	DANIEL CABRERA	13260 IMMOKALEE RD.
Add			STE 6-106
Remove			NAPLES, FL 34120
2) Change	CEO	MIGUEL M. GONZALEZ	13260 IMMOKALEE RD.
Add			STE 6-106
Remove			NAPLES, FL 34120
3) Change	CFO	DANIEL CABRERA	13260 IMMOKALEE RD.
Add			STE 6-106
Remove			NAPLES, FL 34120
4) Change	CFO	MIGUEL M. GONZALEZ	13260 IMMOKALEE RD.
✓ Add			STE 6-106
Remove			NAPLES, FL 34120
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	eles, enter change(s) here: (Be specific)		
All the property of the state o	***************************************		
			-
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		· · · · · · · · · · · · · · · · · · ·	

an amendment provides for an exch	ange, reclassification, or car	ncellation of issued shares.	
provisions for implementing the ame (if not applicable, indicate N/A)	dment if not contained in the	he amendment itself:	
(у ног аррисаме, тасые та)			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
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)	
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 NOVEMBER 40 2014	
Signature	
(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)	
DANIEL CABRERA	
(Typed or printed name of person signing)	
CEO, CFO	
(Title of person signing)	