P10000053838

| (Re | equestor's Name) | |
|-------------------------|--------------------|---|
| | | |
| (Ad | ldress) | |
| | | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | <u>, #1) </u> |
| (Oil | tyrotaterziph none | · **) |
| PICK-UP | TIAW [| MAIL |
| | | |
| (Bu | siness Entity Nam | ne) |
| | | |
| (Do | cument Number) | |
| Certified Copies | Certificates | of Status |
| • | _ | |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



900210806449

08/08/11--01020--023 **35.00



Con floor

COVER LETTER

TO: Amendment Section **Division of Corporations** JUAN DO All Inc. NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JUAN SERRAMO Name of Contact Person JUAN DO All Inc. E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person at (8-50) 686-6740

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State:

Mailing Address

\$35 Filing Fee

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

☐ \$43.75 Filing Fee &

Certificate of Status

Street Address

☐ \$43.75 Filing Fee &

Certified Copy

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Additional copy is enclosed)

☐ \$52.50 Filing Fee

Certified Copy

Certificate of Status

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation of

| JUAN DO | All, Inc. | | | |
|--|---------------------------|------------------------------|----------------------|--|
| (Name of Corporation as currently filed with the Florida Dept. of State) | | | | |
| 27-3620 | 9/1 | | | |
| (Document Number | er of Corporation (if kno | wn) | | |
| Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation: | Florida Statutes, this F | lorida Profit Corporation | adopts the following | |
| A. If amending name, enter the new name of the | ne corporation: | | • | |
| | \$ (1)? | 41 22 47 | The new | |
| name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the de | esignation "Corp," "Inc | c," or "Co". A profession | nal_corporation | |
| name must contain the word "chartered," "profes | ssional association," or | the abbreviation "P.A." | 三部 | |
| B. Enter new principal office address, if applic | able: | | | |
| (Principal office address <u>MUST BE A STREET</u>) | ADDRESS) | | F-8 | |
| | | | * *-1 | |
| | | | E B | |
| | | | 3 | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE | FROY | : | 55 A | |
| (Maring united MAT DE ATOST OF TEL | <u>. BUA</u>) | | | |
| | | | | |
| | | | | |
| D. If amending the registered agent and/or reg | istered office address i | n Florida, enter the name | of the | |
| new registered agent and/or the new registe | | | | |
| Mann of Non Domintored Agents | | | | |
| Name of New Registered Agent: | | | | |
| New Professor Address | | - J.J.,) | | |
| New Registered Office Address: | (Florida street d | iaaress) | | |
| | | , Florida | <u> </u> | |
| | (City) | (Zip Code) | | |
| New Registered Agent's Signature, if changing | Registered Agent: | | | |
| I hereby accept the appointment as registered age | | and accept the obligations (| of the position. | |
| | | | | |
| Sign | nature of New Registere | d 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 |
|--------------|---|---------------|-------------------|
| ASURER | Rodriguez L. Porter | 6870Warren Rd | . ☑ Add ☐ Remove |
| | | | ☐ Add ☐ Remove |
| | | | ☐ Add ☐ Remove |
| | ling or adding additional Articles, enter of ditional sheets, if necessary). (Be specificational sheets) | | |
| | | | |
| | | | |
| | - | | |
| | | | |
| provisio | nendment provides for an exchange, recla ons for implementing the amendment if n of applicable, indicate N/A) | | |
| | be Exchanged | from Presi | |
| An | D vice presider | OF ASUDOR | percent |
| | | | |
| | | | |

| | 179-27711 |
|--|---|
| The date of each amendment Figure 2 | (date of adoption is required) |
| Effective date <u>it applicable</u> : | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| 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. |
| | re approved by the shareholders through voting groups. The following statemened 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) |
| action was not required. The amendment(s) was/we action was not required. | re adopted by the incorporators without shareholder action and shareholder |
| · | 14 29, 2011 |
| 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) |
| | Juan Serrano |
| | (Typed or printed name of person signing) |
| | President |
| | (Title of person signing) |