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SECRETARY OF STATE

Malika

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION:	R.E.O. S	OLUTIONS D.S. CO	RPORATION
DOCUMENT N	UMBER:		P1000005938	6
The enclosed Arti	cles of Amendmen	and fee are s	ubmitted for filing.	
Please return all co	orrespondence cond	cerning this m	atter to the following:	
			YN TRUJILLO of Contact Person	
		Halle	or Comact Letaon	
PRATS FERNANDEZ & CO, PA Firm/ Company			and the state of t	
			····· ····	
	2121 PONCE DE LEON BLVD STE. #240 Address)
			SABLES, FL 33134 State and Zip Code	
	INF E-mail address	O@PRATSF	ERNANDEZ.COM)
For further inform	ation concerning th	is matter, plea	se call:	
	ELYN TRUJILLO		at (305)	444-8333
Name	of Contact Person		Area Code & Daytime	elephone Number
Enclosed is a chec	k for the following	amount made	payable to the Florida Dep	artment of State:
□ \$35 Filing Fee	543.75 Filing F Certificate of S		S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Z \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations			Street Address Amendment Section Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314			Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	cle

Articles of Amendment to Articles of Incorporation of

R.E.O. SOLUTIONS D.S. CORPORATION

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is Florida Profit Corneration adopts the following
as Frontau Froju Corporation adopts the folio
The new
on," "company," or "incorporated" or the "Inc," or "Co". A professional corporation or the abbreviation "P.A."
608 NW 9 TERR
AMI FL 33182
08 NW 9 TERR
MI FL 33182
ess in Florida, enter the name of the
eet address)
, Florida
(Zip Code)

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
VPTD	SAMIRA COLOMA	2121 PONCE DE LEON BLVD: CORAL GABLES, FL 33134	Add Remove
VPTD	SAMIRA DIAZ	13608 NW 9 TER	Add Remove
			_ [] Add _ [] Remove
	ding or adding additional Articles, dditional sheets, if necessary). (Be		
provisi	nendment provides for an exchang ons for implementing the amendm not applicable, indicate N/A)	ee, reclassification, or cancellation of is ent if not contained in the amendment	sued stares, itself:

The date of each amendment	(a) adaption: 8/2/16
,	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statemend 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)
	(voting group)
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
✓ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_AUG	SUST 2, 2010
Signature	a director, president or other officer – if directors or officers have not been
sele	cted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	VPTD
	(Title of person signing)