Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

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The Enter the email address for this business entity to be used for future annual report mailings. Enter only one small address please.\*\*

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN

17201 OCEAN FOUR, CORP.

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\$43.75

Amend/CC (10 9,50.13 ď

September 18, 2013

17201 OCEAN FOUR, CORP. 1925 BRICKELL AVE SUITE D205 MIAMI, FL 33129

SUBJECT: 17201 OCEAN FOUR, CORP.

REF: P10000082413

PIEASE CHUE ORIGINAL SURMISSION

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(1) FLORIDA DEPARTMENT OF STATE Division of Corporations

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filling cover sheet.

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"Irene Albritton Regulatory Specialist II FLORIDA

FAX Aud. #: H13000207083 Letter Number: 713A00021901

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Articles of Amendment to Articles of Incorporation of

of	
17201 OCEAN FOUR, CORP.	
(Name of Corporation as currently flied with the Fig.	rida Dent, of State)
P1000082413 (Document Number of Corporation (If I	mown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:	
A. If amending name, enter the new name of the corporation;	
<u> </u>	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Ci word "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	1001 Brickell Bay Drive, Suite 3112
Principal office address MUST BE A STREET ADDRESS)	Miami, Florida 33131
C. Enter new mailing address, if applicable:	1001 Brickell Bay Drive, Suite 3112
(Mailing address MAY BE A POST OFFICE BOX)	Mlaml, Florida 33131
	Wilding Tiorida 30101
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent NRAI Services, Ir	nc.
1200 South Pine	Island Road
(Florida stree	
New Registered Office Address: Plantation	Plorida 33324
. (CIV)	(Zip Code)
New Resistered Agent's Signature, if checking Registered Agent: Thereby accept the appointment as registered agent. I am familiar wit	th and accept the obligations of the position.
( land	
Synques flow Registered Ag	and tropanging the Secret NR AT
Contraine Doll	well, Most stuy.

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 Doe	
<b>X</b> Remove	¥	Mike Jones	
X Add	<u>8Y</u>	Sally Smith	•
Type of Action (Check One)	Title	Name	Address
1) Change	D	LUIS ARMANDO CEDENO ESTRADA	1925 BRICKELL AVE SUITE D205
Add			MIAMI, FL 33129
X Remove			· · · · · · · · · · · · · · · · · · ·
2) Change	D	Fernando A. Gil	Barriada Montelimer, Calle El Recodo
X Add			No. A-377, City of Chorrera
Ramove			Republic of Panama, Panama
3 ) Change			
Add	•		
Remove			,
4) Change			
Add	***************************************		
Remove			
5)Change	·		
Add			
Remove		÷	
6) Change			
Add		<del></del>	
Remove			

	ng or adding add ditional sheets, if	necessary). (i	Be specific)			
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an amer roysion (if no	ndment provides ns for implement nt applicable, indi	for an exchaning the amendr	re, reclassifica neat if not co	ition, or cancel itslued in the A	istion of issued a mendment itself	hares. L
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The date of each emendment(s) adoptions	If other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Ldoption of Amendment(x) (CHECK ONE)	
The amendment(s) wastwere adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders wastwere 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 emondment(s) was were sufficient for approval	
(voting group)	
(voting group)	
The amendment(s) was/were edopted 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 September 13, 2013 Signature	
(By a director, president or univer-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 ilduciary)	
FERNANDO A. GII.  (Typed or printed name of person signing)	-
DIRECTOR	
(This of person signing)	<del></del>