P1000098857

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2010 DEC IN P 12: 3N SECRETARY OF STATE

Ameril Mewis 12-16-10

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	CD Taxi, Inc		
DOCUMENT N	UMBER:	P10000098859		
The enclosed Arti	cles of Amendment and fee a	are submitted for filing.		
Please return all e	orrespondence concerning th	is matter to the following:		
	and the control of the cold to	Rafael Vidal		
	,	Name of Contact Person		
		CD Taxi, Inc		
		Firm/ Company		
	133 NE 2 Avenue # 813			
	Address			
		Miami, FL 33132		
	C	City/ State and Zip Code		
	sales E-mail address: (to be use	@cdsushi.com rd for future annual report notification)		
For further inform	ation concerning this matter.	please call:		
	Rafael Vidal	at (305) 8	90-9805	
Name	e of Contact Person	Area Code & Daytime To	lephone Number	
finclosed is a chec	k for the following amount n	nade payable to the Florida Depar	tinent of State:	
∑ 835 Filling Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filmg Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ	le	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

FILED

the Florida Dept. of State)	2010 DEC 1 4 P 12: 3	
	GEORETARY OF STATE TALLAHASSEE, FLORID	
P1000098859 (Document Number of Corporation (if known)		
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on:		
poration," "company," or "; "orp," "Inc," or "Co" A pre iation," or the abbreviation "I	ofessional corporation	
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e address in Florida, enter the dress:	name of the	
rida street address)		
. Fic	orida	
	tion (if known) tion (if known) tes, this Florida Profit Corpo on: poration, " "company, " or " orp, " "Inc, " or "Co" A pro iation, " or the abbreviation "I	

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)

Title	<u>Name</u>	Address	Type of Action
<u>VP</u>	Ines Filloy	133 NE 2 Avenue # 813 Miami, FI 33132	
			Add Remove
	ling or adding additional Article (ditional sheets, if necessary) — (L		
<u>provisi</u>	mendment provides for an excharons for implementing the amendres applicable, indicate N/A)	nge, reclassification, or cancellation of ment if not contained in the amendme	lissued shares, ut itself:

The date of each amendment	(s) adoption: December 13, 2010
 Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes east for the amendments ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendments).
"The number of votes	cast for the amendment(s) was/were sufficient for approval
· by	···
	(voting group)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholde \cdot
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	12-13-10
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
арр	ointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)