## PH00000012

| (Re                     | equestor's Name)   |                  |
|-------------------------|--------------------|------------------|
| (Ad                     | dress)             |                  |
| (Ad                     | ldress)            | ·                |
| (Cit                    | ty/State/Zip/Phone | <del>= #</del> ) |
| PICK-UP                 | ☐ WAIT             | MAIL             |
| (Bu                     | isiness Entity Nar | ne)              |
| (De                     | ocument Number)    |                  |
| (DC                     | ocument Number)    |                  |
| Certified Copies        | Certificates       | s of Status      |
| Special Instructions to | Filing Officer:    |                  |
|                         |                    | <u> </u>         |
|                         |                    |                  |
|                         |                    |                  |
| <u>}</u>                |                    |                  |

Office Use Only



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05/18/12--01014--001 \*\*52.50

DIVISION OF CORPORATIONS

Amund CCICUS (0.5)55/15

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPOR           | RATION: WOW QUE<br>BER: P1100000061         |  |  |
|--------------------------|---|--|--|
| The enclosed Articles    | of Amendment and fee are sul                | bmitted for filing.  |  |
| Please return all corres | spondence concerning this mat               | tter to the following:   | ·  |
|                          | LUIS M. GARCIA                              |  |  |
|                          | WOW QUE BARA                                | Name of Contact Person   |  |
|                          | WOW QUE BARA                                |  |  |
|                          | 4000 W EL AOLE                              | Firm/ Company  |  |
|                          | 1829 W FLAGLE                               | RSIREEI  |  |
|                          |   | Address  |  |
|                          | MIAMI, FL 33135                             |  |  |
|                          | -   | City/ State and Zip Code   | •  |
|                          |   |  |  |
| ,                        | E-mail address: (to be us                   | ed for future annual report  | notification)  |
|                          | 12 man address (vo be ad                    | ou los rusus uninum repost   | ,  |
| For further information  | n concerning this matter, pleas             | se call:   |  |
| LUIS M. GAF              | RCIA  | at ( 305   | 644-1340   |
| Name                     | of Contact Person                           |  | de & Daytime Telephone Number  |
| Enclosed is a check fo   | r the following amount made p               | payable to the Florida Depa  | rtment of State:   |
| □ \$35 Filing Fee        | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|                          | iling Address<br>endment Section            |  | Address<br>ment Section  |

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

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

## Articles of Amendment to Articles of Incorporation of

| WOW QUE BARATO IN  | C.                              |                            |                          |  |
|--|---------------------------------|----------------------------|--------------------------|--|
|  | currently filed with the Flo    | rida Dept. of State)       |                          |  |
| P11000000612   |                                 |                            |                          |  |
| (Documen   | nt Number of Corporation (if l  | (nown)                     |                          | ,  |
| Pursuant to the provisions of section 607. its Articles of Incorporation:  | 1006, Florida Statutes, this Fl | orida Profit Corporation a | adopts the following     | g amendment(s) to                            |
| A. If amending name, enter the new na  | me of the corporation:          |                            |                          |  |
| ·  |                                 |                            |                          | _The new                                     |
| name must be distinguishable and cont<br>"Corp.," "Inc.," or Co.," or the design<br>word "chartered," "professional associal | ation "Corp," "Inc," or "C      | o". A professional corpor  |                          |  |
| B. Enter new principal office address, (Principal office address MUST BE A ST  |                                 |                            | <del></del>              | -  |
| C. Enter new mailing address, if appli<br>(Mailing address MAY BE A POST of  |                                 |                            |                          | DIVISION OF CORPORATIONS 12 MAY 18 AH 10: 37 |
| D. If amending the registered agent an new registered agent and/or the new   |                                 | •                          | me of the                | 37   |
| Name of New Registered Agent   | 1829 W FLAGLE                   |                            | <u>-</u>                 |  |
|  | (Florida stree                  |                            | <del></del> -            |  |
| New Registered Office Address:   | MIAMI                           | . Florida                  | ្ន33135                  |  |
|  | (City)                          |                            | (Zip Code)               | •  |
| New Registered Agent's Signature, if cl I hereby accept the appointment as registered.                                       |                                 |                            | ns of the position.<br>- |  |

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.

| Example: XChange              | <u>PT</u>    | John Doe                   |                                      |
|-------------------------------|--------------|----------------------------|--------------------------------------|
| X Remove                      | <u>v</u>     | Mike Jones                 |                                      |
| X Add                         | <u>sv</u>    | Sally Smith                |                                      |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Namç</u>                | <u>Addres</u> s                      |
| 1) Change Add Remove          | Þ            | SANDY YUDIT CABRERA PUERTA | 1829 W FLAGLER ST<br>MIAMI, FL 33135 |
| 2) Change                     | P            | LUIS M. GARCIA             | 1829 W FLAGLER ST<br>MIAMI, FL 33135 |
| 3) Change Add Remove          | v            | LUIS M. GARCIA             | 1829 W FLAGLER ST<br>MIAMI, FL 33135 |
| 4) Change<br>Add<br>Remove    |              |                            |                                      |
| 5) Change<br>Add<br>Remove    |              |                            |                                      |
| 6) Change<br>Add<br>Remove    |              |                            |                                      |

| f amending or adding additional Artic<br>attach additional sheets, if necessary).                                | (Be specific)  |  |
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| If an amendment provides for an exch<br>provisions for implementing the ame<br>(if not applicable, indicate N/A) | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |  |
|  |  |  |
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| The date of each amendment(s) a                                | doption: 05/15/2012  |
|--|--|
| Effective date if applicable:                                  | 5/15/2012  |
| <u></u>  | (no more than 90 days after amendment file date)   |
| Adoption of Amendment(s)                                       | (CHECK ONE)  |
| The amendment(s) was/were ad<br>by the shareholders was/were s | opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.   |
|  | proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):  |
| "The number of votes cas                                       | t for the amendment(s) was/were sufficient for approval  |
| by   | (voting group)   |
|  |  |
| ☐ The amendment(s) was/were ad action was not required.        | opted by the board of directors without shareholder action and shareholder   |
| The amendment(s) was/were adaction was not required.           | opted by the incorporators without shareholder action and shareholder  |
| Dated_05/15  | /2012  |
| Signature  | fgfaly.  |
| (By a select   | director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary) |
|  | LUIS M. GARCIA   |
|  | (Typed or printed name of person signing)  |
|  | PRESIDENT  |
|  | (Title of person signing)  |