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| PICK-UP WAIT MAIL |
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| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

| NAME OF CORE | PORATION: CARM | 11 SERVICE CORF | 2. |
|---|--|---|---|
| DOCUMENT NU | MBER: <u>P 11 000</u> | 0/7628 | |
| The enclosed Artic | les of Amendment and fee are | e submitted for filing. | |
| Please return all co | rrespondence concerning this | matter to the following: | |
| | LILIANN T Na | OZRES me of Contact Person | ······································ |
| | CARMA SER | Vi Co Co12 P. Firm/ Company | |
| | 17771 SW | . 152 CT Address | |
| | MiAMI, I | 7 33 87 y/ State and Zip Code | en regenerate characteristic en de Paris de Constantino |
| | | Corpo Yahoo. Com | |
| <u></u> | E-mail address: (to be used | for future annual report notification) | |
| For further informa | ation concerning this matter, p | olease call: | |
| Cazlo(Name | of Contact Person | at (786) 205-6 Area Code & Daytime Tel | 500 lephone Number |
| Enclosed is a check for the following amount made payable to the Florida Department of State: | | | |
| \$35 Filing Fee | \$43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address | | Street Address | |
| Amendment Section Division of Corporations | | Amendment Section Division of Corporations | |

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment

Articles of Incorporation

FILED

2011 JUN 10 PM 12: 02 (Name of Corporation as currently filed with the Florida Dept. of State ECRETARY OF STATE TALLAHASSEE. FLORID:

owing

| (City) (City) (Florida Street address) (Courted to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts endment(s) to its Articles of Incorporation: If amending name, enter the new name of the corporation: | | | | 1.11000017 |
|---|-------------------|-------------------|--|---|
| If amending name, enter the new name of the corporation: NONe | | | r of Corporation (if known) | (Document Nu |
| me must be distinguishable and contain the word "corporation," "company," or "incorporated' previation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation the word "chartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: incipal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) , Florida | pts the | Corporation adop | Florida Statutes, this Florida Profit | |
| If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corp. and professional corp. and professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: (Mailing address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) | | | e corporation: | amending name, enter the new name of |
| If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corp. and professional corp. and professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: [Mailing address MUST BE A STREET ADDRESS] Enter new mailing address, if applicable: [Mailing address MAY BE A POST OFFICE BOX] [Mailing address MAY BE A POST OFFICE BOX] [If amending the registered agent and/or registered office address in Florida, enter the name of the new registered address: Name of New Registered Agent: [Florida street address] [Florida street address] | _The | | None - | · |
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| Name of New Registered Agent: New Registered Office Address: (Florida street address) , Florida | <u>he</u> | er the name of th | | |
| New Registered Office Address: (Florida street address) , Florida | | | red office address: | ew registered agent and/or the new reg |
| , Florida | | - | | Name of New Registered Agent: |
| , Florida | | | ···· | |
| | | | | |
| | | _ | (Florida street address) | New Registered Office Address: |
| | | - Elouido | (Florida street address) | New Registered Office Address: |
| | | | | New Registered Office Address: |
| w Registered Agent's Signature, if changing Registered Agent: reby accept the appointment as registered agent. I am familiar with and accept the obligations of the p | | | (City) (Zip | |
| reby accept the appointment as registered agent. I am jamiliar with and accept the obligations by the p | | Code) | (City) (Zip | Registered Agent's Signature, if changi |

Signature of New Registered 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 | <u>Address</u> | Type of Action |
|--------------|---|--------------------------------------|-------------------|
| SEC. | PASTOR GUERRERO | 17771 SW. 150 CT MIAMI FI , 33187 | □ Add □ Remove |
| | | | |
| | | | |
| | ding or adding additional Articles, ente dditional sheets, if necessary). (Be spec | | |
| provisi | mendment provides for an exchange, re ons for implementing the amendment if not applicable, indicate N/A) | | |
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| | | | |
| | | | |

| The date of each amendment | (s) adoption: 5 - 16 - 11 |
|---|---|
| . ~ Effective date <u>if applicable</u> : | (s) adoption: 16 [[(date of adoption is required) (no more than 90 days after amendment file date) |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/weby the shareholders was/weby | 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 statement d 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. | re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder |
| Dated | (/3/1/ |
| sele | a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary) |
| | (Typed or printed name of person signing) |
| | President (Title of person signing) |