# 110000 aa

| (Re                     | equestor's Name)   |              |
|-------------------------|--------------------|--------------|
| (Ad                     | ldress)            |              |
| (Ac                     | idress)            | <del> </del> |
| (Ci                     | ty/State/Zip/Phone | e #)         |
| PICK-UP                 | ☐ WAIT             | MAIL         |
| (Bu                     | usiness Entity Nar | ne)          |
| (Do                     | ocument Number)    |              |
| Certified Copies        | Certificates       | s of Status  |
| Special Instructions to | Filing Officer:    |              |
|                         |                    |              |
|                         |                    |              |
|                         |                    |              |
|                         |                    |              |

Office Use Only



700237546937

07/23/12--01006--023 \*\*35.00



### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

|                           | Dhasa Osa                                   | Managamant I   |  |
|---------------------------|---|--|--|
| NAME OF CORPORA           | ATION: Phase One                            | ivianagement, i  | nc.  |
| DOCUMENT NUMBE            | <sub>ER:</sub> P1100002212                  | 5  |  |
| The enclosed Articles of  | f Amendment and fee are su                  | bmitted for filing.  |  |
| Please return all corresp | ondence concerning this ma                  | tter to the following:   |  |
| 1                         | Natalia Rodrigue:                           | Z  |  |
| <u>.</u>                  | 3   | Name of Contact Persor   | 1  |
|                           | liva Cube, Inc.                             |  |  |
| _                         | · · · · · · · · · · · · · · · · · · ·       | Firm/ Company  |  |
| 2                         | 2206 NE 123 Stre                            | eet  |  |
| _                         |   | Address  |  |
| 1                         | North Miami Bea                             | ch, FL 33181   |  |
| _                         |   | City/ State and Zip Code   | e  |
| linal                     | lo@aol.com                                  |  |  |
| <u>ligai</u>              | _   | sed for future annual report                                       | notification)  |
|                           |   |  | ······································   |
| For further information   | concerning this matter, pleas               | se call:   |  |
| Ivon Gallo                |   | .954   | 818-8548   |
|                           | Contact Person                              | at (at (   | de & Daytime Telephone Number  |
|                           |   |  | •  |
| Enclosed is a check for   | the following amount made                   | payable to the Florida Depa  | artment 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) |
| <u>Maili</u>              | ng Address                                  | Street   | Address  |
|                           | dment Section                               |  | Iment Section  |
|                           | on of Corporations<br>3ox 6327              |  | on of Corporations<br>Building   |
|                           | nassee FL 32314                             |  | Executive Center Circle  |

2661 Executive Center Tallahassee, FL 32301

# **Articles of Amendment Articles of Incorporation**

## Phase One Management, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

## P11000022125

(Document Number of Corporation (if known)

dment(s) to

| IVA CUBES, INC.  |   |                                  |                 |
|--|---|----------------------------------|-----------------|
| ame must be distinguishable and contain the<br>Corp.," "Inc.," or Co.," or the designation "C<br>ord "chartered," "professional association," or | Corp." "Inc," or "Co". A profession   | or "incorpora<br>onal corporatio | ted" or the ab- |
| Enter new principal office address, if applic rincipal office address MUST BE A STREET   |   | -                                |                 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE  |   |                                  |                 |
| (Maning unit cas MAT BE A TOST OFFICE  | <u> </u>  |                                  |                 |
| (mailing uturess MAT BEAT OST OTTICE   | <u></u>   |                                  |                 |
|  |   | nter the name                    | of the          |
|  | vistered office address in Florida, e   | nter the name                    | of the          |
| If amending the registered agent and/or reg  | vistered office address in Florida, e   | nter the name                    | of the          |
| If amending the registered agent and/or reg<br>new registered agent and/or the new registe   | vistered office address in Florida, e   | nter the name                    | of the          |
| If amending the registered agent and/or reg<br>new registered agent and/or the new registe   | estered office address in Florida, estred office address:  (Florida street address) | nter the name                    | of the          |

# 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 <math>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 Do  | <u>oc</u>   |         |
|-------------------------------|--------------|----------|-------------|---------|
| X Remove                      | <u>V</u>     | Mike Jo  | nes         |         |
| X Add                         | <u>sv</u>    | Sally Sn | <u>nith</u> |         |
| Type of Action<br>(Check One) | <u>Title</u> |          | Name        | Address |
| 1) Change                     |              | _        |             |         |
| Add                           |              |          |             |         |
| Remove                        |              |          |             |         |
| 2) Change                     |              | _        |             |         |
| Add                           |              |          |             |         |
| Remove                        |              |          |             |         |
| 3)Change                      |              |          |             |         |
| Add                           |              | _        |             |         |
| Remove                        |              |          |             |         |
|                               |              |          |             |         |
| 4) Change                     | <del></del>  | _        |             |         |
| Add                           |              |          |             |         |
| Remove                        |              |          |             |         |
| 5) Change                     |              | _        |             |         |
| Add                           |              |          |             |         |
| Remove                        |              |          |             |         |
|                               |              |          |             |         |
| 6) Change                     | _            | _        |             |         |
| Add                           |              |          |             |         |
| Remove                        |              |          |             |         |

| 2 27   | (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) | nange, reclassification, or cancellation of issued shares, and   |
| provisions for implementing the ame  | nange, reclassification, or cancellation of issued shares, and and and an and an and an and an an and an an and an |
| provisions for implementing the ame  | nange, reclassification, or cancellation of issued shares, and   |
| provisions for implementing the ame  | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:  |
| provisions for implementing the ame  | nange, reclassification, or cancellation of issued shares, and nament if not contained in the amendment itself:  |
| provisions for implementing the ame  | nange, reclassification, or cancellation of issued shares, and nament if not contained in the amendment itself:  |
| provisions for implementing the ame  | nange, reclassification, or cancellation of issued shares, and nament if not contained in the amendment itself:  |

| The date of each amendment(s)                               | adoption: 07/20/2012   |
|---|--|
| Effective date if applicable:                               | 7/20/2012  |
|   | (no more than 90 days after amendment file date)   |
| Adoption of Amendment(s)                                    | ( <u>CHECK ONE</u> )   |
| ☐ The amendment(s) was/were as by the shareholders was/were | dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.   |
|   | oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):   |
| "The number of votes eas                                    | st for the amendment(s) was/were sufficient for approval   |
| by  |  |
|   | (voting group)   |
| action was not required.                                    | dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder |
| Dated 07/20 Signature                                       | 12012<br>Natalea Kodrigues   |
|   | director, president or other officer - if directors of officers have not been  |
|   | ted, by an incorporator — if in the hands of a receiver, trustee, or other court inted (iduciary by that fiduciary)                                |
|   | Natalia Rodriguez  |
|   | (Typed or printed name of person signing)  |
|   | President  |
|   | (Title of person signing)  |