P11000024013

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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7" (2, 3 - 7, 27)

COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: OD/ S DOCUMENT NUMBER: P//0000	envices I	nc		
DOCUMENT NUMBER: P1/0000	24013			
The enclosed Articles of Amendment and fee are sub-	mitted for filing.			
Please return all correspondence concerning this matter	er to the following:			
CARMEN	Name of Contact Person			
	Name of Contact Person			
	Firm/ Company	,		
8788 SW/	12 Th ST APT Address	704		
MIAMI, FL 3.3/74 City/ State and Zip Code				
E-mail address: (to be use	o.com			
E-mail address: (to be use	ed for future annual report	notification)		
For further information concerning this matter, please	e call:			
CARMEN VILMES	at (786	237/664 de & Daytime Telephone Number		
Name of Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check for the following amount made p	ayable to the Florida Depa	rtment of State:		
\$35 Filing Fee \$\times \text{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		Address		
Amendment Section Division of Corporations		ment Section in of Corporations		
P.O. Box 6327	Clifton	Building		
Tallahassee, FL 32314	2661 E	xecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED
13 MAR 18 AM 8: 41

of	IS MAR IR ALL
ODI SERVICES INC	SECRES AM 8:44
(Name of Corporation as currently filed with the Florida Dept. of State)	LAMASSE OF STATE
P 110000 24013	FLORIDA
(Document Number of Corporation (if known)	

N/A	he corporation:			1	Tha noru
N/A ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation " ord "chartered," "professional association," o	Corp," "Inc," or "Co	o". A profession	r "incorpora al corporatio	ted" or the abb	previation ontain the
B. Enter new principal office address, if app		8788	SW 12	, th st AF	ot 20 4
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		MIAMI	FL 3	3/74	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	E BOX)	8788	Sw /.	2 14 57	art z
		MIAMI	IFC	33174	
		ss in Florida, en	er the name	of the	
new registered agent and/or the new regist	tered office address:		er the name	of the	
	tered office address:		er the name	of the	
new registered agent and/or the new regist	tered office address:		er the name	of the	
new registered agent and/or the new regist Name of New Registered Agent	ered office address: N/A (Florida stree	et address)			
	ered office address: N/A (Florida stree				

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 on 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: X Change	PT John Doe	
X Remove	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	P OSDALIA CONSUEBRA	8401 SW 107 th AVE
Add		MINHI, FL 3.317.3
X Remove		
2) Change	P CARMEN VILTHES	8788 SW 12th st Apt 209 MIAHI, FL 33174
<u></u> ✓ Add		ranity (2 3311)
Remove 3) Change	N/Λ	
Add		
Remove	/	
4) Change		
Add	·	
Remove	., /	
5) Change		
Add		
Remove	į	
6) Change	N/A	
Add	,	
Remove		

шон шимполни элесіз	if necessary).	(ne specific)			
b			·		
		- /A	. 		
		NA			
		1			
					
					
					
an amendment prov	ides for an exch	ıange, reclassifi	cation, or cand	ellation of issu	ed shares.
provisions for implen	ienting the ame	ndment if not c	ontained in the	amendment i	tself:
(if not applicable,	indicate N/A)				
					
	/	N/A			
		1			
					

he date of each amendme	nt(s) adoption: 03/04/13
ffective date <u>if applicable</u>	: (no more than 90 days after amendment file date)
doption of Amendment(s)	(CHECK ONE)
The amendment(s) was/w by the shareholders was/	were adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	vere approved by the shareholders through voting groups. The following statement ided for each voting group entitled to vote separately on the amendment(s):
"The number of vo	tes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	were adopted by the incorporators without shareholder action and shareholder
The amendment(s) was/v action was not required.	
Dated	03/06/13
Signature	
	(By a frector, president or other 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 fiduciary)
	Ospalia Consuegna
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)