# P1100028670

| (Re                     | questor's Name)        |
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| (Cit                    | y/State/Zip/Phone #)   |
| PICK-UP                 | WAIT MAIL              |
| (Bu                     | siness Entity Name)    |
| (Do                     | cument Number)         |
| Certified Copies;       | Certificates of Status |
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# **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORP   | ORATION: INSTANT                           | GLOBAL EXCHANGE INC.  |  |
|--|--|---|--|
| DOCUMENT NU  | MBER: <u>P11000028670</u>                  |   |  |
| The enclosed Artico  | les of Amendment and fee                   | are submitted for filing.   |  |
| Please return all co   | rrespondence concerning th                 | is matter to the following:   |  |
|  | AVE  | LINO CORZO  |  |
|  | Name                                       | of Contact Person   |  |
|  | INSTANT GLO                                | BAL EXCHANGE INC.   |  |
| <del></del>  | Fi   | irm/ Company  | <del></del>  |
|  | 20   | 05 NE 40 RD   |  |
|  |  | Address   | <del></del>  |
|  | HOMEST                                     | EAD, FL 33033   |  |
| <del></del>  | City/ S                                    | State and Zip Code  |  |
|  | igecorzo                                   | @gmail.com  |  |
|  | E-mail address: (to be use                 | @gmail.com<br>ed for future annual report notification)   | <del></del>  |
| For further informa  | tion concerning this matter.               | , please call:  |  |
| AVELINO CORZO  | M.   | at ( 305 ) 746-5406   |  |
| Name   | of Contact Person                          | Area Code & Daytime Telephone   | e Number   |
| Enclosed is a check  | for the following amount r                 | made payable to the Florida Department  | of State:  |
| <b>√</b> \$35 Filing Fee   | \$43.75 Filing Fee & Certificate of Status | Certified Copy C (Additional copy is C enclosed) (A   | 52.50 Filing Fee<br>lertificate of Status<br>lertified Copy<br>Additional Copy<br>is enclosed) |
| Mailing Ad<br>Amendment<br>Division of<br>P.O. Box 63<br>Tallahassee | Section<br>Corporations<br>27              | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |  |

## Articles of Amendment to Articles of Incorporation of

### INSTANT GLOBAL EXCHANGE INC.

ALASSO MONON

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

## P11000028670

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

| The new name must be distinguishable  |  | 2. 6.00000000000000000000000000000000000 |
|---|--|--|
| The new name must be distinguishable "incorporated" or the abbreviation "Corp" "Co". A professional corporation nassociation," or the abbreviation "P.A." | o.," "Inc.," or Co.," or the designation | "Corp," "Inc," or                        |
| B. Enter new principal office address, if a (Principal office address MUST BE A STR   |  |  |
| C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF  |  |  |
| D. If amending the registered agent and/onew registered agent and/or the new re   |  | nter the name of the                     |
| Name of New Registered Agent:   | MANELIVE CORZO                           |  |
|   | 2005 NE 40 RD                            |  |
| New Registered Office Address:  | (Florida street address)                 |  |
|   | HOMESTEAD                                | , Florida 33033                          |
|   | (City)                                   | (Zip Code)                               |
| New Registered Agent's Signature, if chan   | ging Registered Agent:                   |  |

Signature of New Registered Agent, if changing

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

| Title(s)             | <u>Name</u>                       |                       | Address               |                  |
|----------------------|-----------------------------------|-----------------------|-----------------------|------------------|
| 1) <u>P</u>          | MANELIVE CORZO                    | 2005 N                | E 40 RD               |                  |
| •,                   | <del></del>                       | HOMESTE               | EAD, FL 33033         |                  |
|                      |                                   |                       | <del></del>           | <del></del>      |
| 2)                   |                                   |                       |                       | ·                |
|                      |                                   |                       |                       |                  |
| 3)                   |                                   |                       |                       |                  |
| <u></u>              |                                   |                       |                       |                  |
|                      |                                   |                       | -                     |                  |
| 4)                   |                                   |                       |                       | <del></del>      |
|                      |                                   | <del></del>           |                       |                  |
| 5)                   |                                   |                       |                       |                  |
|                      |                                   |                       |                       | <del></del>      |
|                      |                                   |                       |                       |                  |
| 6)                   |                                   |                       |                       |                  |
|                      |                                   |                       |                       | <del></del>      |
|                      |                                   |                       |                       |                  |
| If REMOVING removed: | an officer and/or director, pleas | e list the title(s) a | nd name of the office | r/director to be |
| Title(s)             | <u>Name</u>                       | Title(s)              | <u>Name</u>           |                  |
| 1) <u>P</u>          | YOLAIMY PORTO                     | 4)                    |                       |                  |
| 2)                   |                                   | 5)                    |                       | <del></del>      |
| 3)                   |                                   | 6)                    |                       |                  |

| attac | h additional shee | ts, if necessary). | (Be specific)                                   |  |
|-------|-------------------|--------------------|---|--|
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| prov  |                   | menting the ame    |   |  |
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| The date of each amendmen                        | t(s) adoption: NOVEMBER 1, 2011  |
|--|--|
| Effective date <u>if applicable</u> :            | NOVEMBER 1, 2011 1 - required)   |
| 2  | (no more than 90 days after amendment file date)   |
|  |  |
| Adoption of Amendment(s)                         | ( <u>CHECK ONE</u> )   |
|  | ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.  |
|  | ere approved by the shareholders through voting groups. The following statement and 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)   |
| The amendment(s) was/we action was not required. | re adopted by the board of directors without shareholder action and shareholder  |
| The amendment(s) was/we action was not required. | re adopted by the incorporators without shareholder action and shareholder   |
| Dated NO   | VEMBER 1, 2011   |
| Signature  | x Solver flog.   |
|  | a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court |
|  | ointed fiduciary by that fiduciary)  |
|  | AVELINO CORZO  |
|  | (Typed or printed name of person signing)  |
|  | CHAIRMAN   |
|  | (Title of person signing)  |