P110000 49106

| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| [|
| Special Instructions to Filing Officer: |
| • |
| |
| |
| |
| |
| |

Office Use Only



100280065091

01/20/16--01031--010 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JAN 29 PM 4: 14

JAN 2 1 2016 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: $\frac{Ft}{2}$ | JEGO FINO, IN | CORPORATED | | | |
|--|--|---|--|--|--|
| DOCUMENT NUMBER: | | | | | |
| The enclosed Articles of Amendme | The enclosed Articles of Amendment and fee are submitted for filing. | | | | |
| Please return all correspondence co | ncerning this ma | atter to the following: | | | |
| JESSICA G | UTIERREZ | | | | |
| | | Name of Contact Person | l | | |
| FUEGO FIN | IO, INCORPOR | ATED | | | |
| | | Firm/ Company | | | |
| 110 SE 6TH | STREET 110 T | OWER SUITE 1970 | | | |
| | | Address | · | | |
| FT. LAUDE | RDALE, FL. 33 | 301 | | | |
| | | City/ State and Zip Code | | | |
| FUEGOFINO@G | MAIL COM | | | | |
| | | sed for future annual report | notification) | | |
| Z iibit | | sed for rating annual report | | | |
| For further information concerning | this matter, plea | se call: | | | |
| JESSICA GUTIERREZ | | ,305 | 733-2825 | | |
| Name of Contact Pe | | at (| _) | | |
| Name of Contact Pe | erson | Arca Coo | de & Daytime Telephone Number | | |
| Enclosed is a check for the following | ng amount made | payable to the Florida Depa | rtment of State: | | |
| | 5 Filing Fee & icate 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 Amendment Section Division of Corporations | | Amend Divisio | Address ment Section n of Corporations | | |
| P.O. Box 6327 Tallahassee, FL 3 | 2314 | | Building xecutive Center Circle | | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| FUEGO FINO, INCORPORATED | | |
|--|--------------------------------|---|
| (Name of Corporation as current | y filed with the Florida Dept. | of State) |
| P11000049106 | | |
| (Document Number o | f Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation: | Florida Profit Corporation ado | pts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | | |
| FINO CAPITAL, INC. | | The new |
| name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation "B. Enter new principal office address, if applicable: | 'Co". A professional corporati | ated" or the abbreviation |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | | |
| | | 201 TAL |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | NIA | GJAN 29 CRETARY AHASSE |
| | | <u> </u> |
| | | 100 T T T T T T T T T T T T T T T T T T |
| | | |
| D. If amending the registered agent and/or registered office add- new registered agent and/or the new registered office address | | of the |
| Name of New Registered Agent NIA | <u> </u> | |
| | | |
| (Florida str | reet address) | |
| New Registered Office Address: N/A | , | Florida |
| HEW REGISTER Office Place Fig. 1 | (City) | (Zip Code) |
| | | |
| New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar | | of the position. |
| NA | | |

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)

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: X Change | <u>PT</u> | John Doe | |
|-------------------------------|--------------|-------------|--------------|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| 1) Change | | NIA | |
| Add | | | |
| Remove | | | |
| 2) Change | | NIA | |
| Add | | | |
| Remove | | | <u> </u> |
| 3) Change | | N/A | _ |
| Add | | | |
| Remove | | | |
| 4) Change | | NIA | |
| Add | | | |
| Remove | | | |
| 5) Change | | NIA | |
| Add | | | |
| Remove | | • | |
| 6) Change | | NIA | _ |
| Add | | | |
| Remove | | | |

| . If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | | | | |
|---|---|---------------------------------------|--|-------------|
| | | NIA | | |
| | | | | |
| <u> </u> | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | · · · · · · · · · · · · · · · · · · · | | |
| | | ······· | | |
| | | | | |
| | | | | |
| | | | · | |
| | | | | |
| | | | | |
| | | | | |
| | | | · · · · <u>- · · · · · · · · · · · · · · ·</u> | |
| | | | | |
| If an amendment pr | ovides for an excha | nge, reclassification, or cano | ellation of issued share | <u>s.</u> |
| provisions for impl (if not applicable | <u>lementing the ameno</u> le, indicate N/A) | dment if not contained in the | : amendment itself: | |
| `` | , | NA | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| The date of each amendment(s) | adoption: | , if other than the |
|---|---|--|
| date this document was signed. | | |
| | 2/31/2015 | |
| Effective date <u>if applicable</u> : | | |
| | (no more than 90 days after amendment file date, |) |
| Note: If the date inserted in this document's effective date on the | block does not meet the applicable statutory filing requirement Department of State's records. | s, this date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were a by the shareholders was/were | dopted by the shareholders. The number of votes cast for the ame sufficient for approval. | endment(s) |
| | pproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment | |
| "The number of votes ca | 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 s | |
| 12/28/20 Dated | 15 Lacin (118N) | |
| selec | director, president or other office) – if directors or officers have sted, by an incorporator – if in the hands of a receiver, trustee, or cointed fiduciary by that fiduciary) | |
| | JESSICA GUTIERREZ | |
| | (Typed or printed name of person signing) | |
| | CHAIRPERSON/CEO | |
| | (Title of person signing) | |