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C. MUSTAIN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BOLERO	BEACH CORP.	
DOCUMENT NUMBER: P110000689		
The enclosed Articles of Amendment and fee are so	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
ELENA SAAL		
	Name of Contact Person	n
BOLERO BEACH	H CORP	
	Firm/ Company	
1881 NE 206 ST		
	Address	
MIAMI FL 33179		
	City/ State and Zip Cod	e
elenasaal@hotmail.d	com	
	sed for future annual report	notification)
For further information concerning this matter, plea	se call:	
ELENA SAAL	at (305	_, 300-5141
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee \$\sum \text{Certificate of Status}\$	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 P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

BOLERO BEACH CORP.		
(Name of Corporation as currently filed with the	Florida Dept. of State)	
P11000068916		
(Document Number of Corporation	(if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment	(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	2	
		¢.
C. Enter new mailing address, if applicable:	N/A III	1*
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	<u> </u>	
		٠.
D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address		
NI/A	<u>.ss;</u>	
Name of New Registered Agent IN/A		
(Florida s	street address)	
New Registered Office Address:	, Florida	
(City	ry) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agen	nt:	
I hereby accept the appointment as registered agent. I am familiar	r with and accept the obligations of the position.	

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	PT Jo	ohn Doe	
X Remove	<u>v</u> <u>m</u>	like Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove	D	DIEGO M SAAL	3029 NE 183 LANE AVENTTURA , FL 33160
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)		
N/A		
-		
		
F. <u>If an</u> pro	amendment provides for an exchange, reclassification, or cancellation of issued shares, visions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
N/A	(y nor approach, marcane 11/11)	

<u>, , •</u>	
The date of each amendment	(s) adoption: 05/03/2012
Effective date if applicable:	04/12/2012
Enecuve date <u>it applicable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e 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)
	(voting group)
☐ The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated 05/3	30/2012
se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the bands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	ELENA SAAL
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)