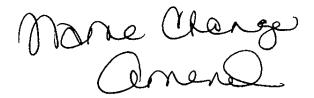
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' COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations HUSTLERS & Flow KITE BOARding Jhc. NAME OF CORPORATION: 110 000 72 975 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company Cyasmany & yartoo. Es. E-mail address: to be used for future annual report notification) For further information concerning this matter, please call: erson at (305) 942 7087.

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation FILED
Hustlens & Flow Lite Bogndings Thes.
(Name of Corporation as currently filed with the Florida Dept. of State)
(Document Number of Corporation (if known) SECRETARY OF STATE TALL AHASSEE, FLORIDA
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
HUSTLE & Flow Kite Boarding Inc. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) ### ### ### ### ### ### ### ### ### #
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
new registered agent and/or the new registered office address:
Name of New Registered Agent:
New Registered Office Address: (Florida street address)
. Florida
, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing
Signature of New Registered Agent, if changing

removed a	and title, name, and address of ditional sheets, if necessary)	ors, enler the title and name of each of each Officer and/or Director being	g added:
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Actio
			
	A/c		
	al/	\mathcal{H}	
provis	mendment provides for an exions for implementing the amnot applicable, indicate N/A)	change, reclassification, or cancella endment if not contained in the am	tion of issued shares, endment itself:
	<u> </u>	A	
		7 7)	
			

The date of each amendment(s) a	adoption: 1 8/15/2011
Effective date if applicable:	(date of adoption is required)
	more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	oproved by the shareholders through voting groups. The following statement 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	,,,
(voi	ing group)
The amendment(s) was/were ad action was not required.	lopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ad action was not required.	lopted by the incorporators without shareholder action and shareholder
Dated	8/18/2011
Signature X	TAVA
(By a di selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	Lihana Corlez.
	(Typed or printed name of person signing)
	Presidente
	(Title of person signing)