## P11000073066

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## **COVER LETTER**

TO: Amendment Section Division of Corporation

Division of Corporations		
NAME OF CORPORATION: SIMALEX	K GROUP CO	•
DOCUMENT NUMBER: P11000073	066	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
ITURRIAGA, (	OVIDIO	
	Name of Contact Perso	n
SIMALEX GR	<del></del>	
111 NE1CT C	Firm/ Company	
<u>111 NE1ST. S</u>		
MIAMI, FL 33	Address	
	City/ State and Zip Cod	e
CATELLEZ1@HG	OTMAIL.COM	
	ised for future annual report	notification)
For further information concerning this matter, plea	ise call:	
ITURRIAGA, OVIDIO	<sub>at (</sub> 786	, 715-0879
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 & 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 Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

SIMALEX GROUP CO.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P11000073066	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following a its Articles of Incorporation:	mendment(s) to
A. If amending name, enter the new name of the corporation:	
ry	he new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbi "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must con word "chartered," "professional association," or the abbreviation "P.A."	eviation
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:	
Name of New Registered Agent	*- ^-
(Florida street address)	<u>्र</u> <b>ड</b> ेक्ष
New Registered Office Address:, Florida,	
(City) (Zip Code)	2 <sup>유</sup> 종교
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.	<b>84 6.3</b> C. 30.837 LEG LEG

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 D	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	Р	<u> </u>	ITURRIAGA, OVIDIO	111 NE 1ST. ST., #3123
Add				MIAMI, FL 33132
Remove				
2) Change	Р	<del></del>	ITURRIAGA, IGOR	111 NE 1ST. ST., #3123
Add				MIAMI, FL 33132
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)
CHANGE OFFICER
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
(i) not applicable, maleure 1971)

The date of each amendment(s) adoption: NOVEMBER 1, 2013	_, if other than the
date this document was signed.	
Effective date if applicable: NOVEMBER 1, 2013	
(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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 adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.  Dated	
(By a director, president of 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)	
ITURRIAGA, OVIDIO	
(Typed or printed name of person signing)	<u> </u>
PRESIDENT	
(Title of person signing)	_