## P11000084832

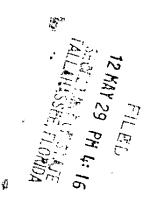
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION: PATONE II	VVESTMENTS (	CORP.
DOCUMENT NUMBE	R: P1100008483	2	
	Amendment and fee are su		
Please return all corresp	ondence concerning this ma	tter to the following:	
P	ATRICK C MARII	E	
<u>-</u>	PATONE INVEST	Name of Contact Person	
	126 NW 21ST S	Firm/ Company  STREET	
	FT LAUDERDAL	Address .E, FL 33313	
_		City/ State and Zip Code	
For further information of	E-mail address: (to be us	ed for future annual report	notification)
SHANTEL MC	ONALD	at ( 954-	794-9094
Name of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$43.75 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)
Amen Divisi P.O. E	ng Address dment Section on of Corporations dox 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

## Articles of Amendment to Articles of Incorporation of

PATONE INVESTMENTS CORP.				
(Name of Corporation as currently filed w	vith the Florida D	ept. of State)		
P11000084832				
(Document Number of Corp.	oration (if known)			
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	utes, this <i>Florida I</i>	<b>Profit Corporation a</b> dd	opts the following a	mendment(s) to
A. If amending name, enter the new name of the corporation	ation:			
			T	he new
name must be distinguishable and contain the word "co" "Corp.," "Inc.," or Co.," or the designation "Corp." "Inword "chartered," "professional association," or the abbre	nc," or "Co". A	npany," or "incorpor professional corporat	ated" or the abbr	eviation
B. Enter new principal office address, if applicable:				G
(Principal office address MUST BE A STREET ADDRES.	<u></u>	•	; [	· 2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			INSTEE. THOMIDA	FILED MAY 29 PM 4: 16
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		orida, enter the name	e of the	
Name of New Registered Agent				
(1	Florida street addres	s)		
New Registered Office Address:	(City)	, Florida_	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am		accept the obligations	of the position.	
Signature of New Re	vaistered Agent if	rhanging		

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>	<u>Name</u>	Address
1) Change	s	MARK MITCHELL	4126 NW 21ST STREET
X Add Remove		•	FORT LAUDERDALE, FLORDA 33313
2) Change Add Remove			
3 ) Change Add Remove	•		
4) Change Add Remove			
5) Change Add Remove	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
6) Change Add Remove			

(attach additional sheets, if ne	ecessary). (Be	nter change(s) he specific)	<u></u> .		
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If an amendment provides for implementin (if not applicable, indicated)	g the amendmen	reclassification, t if not containe	or cancellation of d in the amendme	issued shares, nt itself:	
				·	
			**************************************		

The date of each amendment(s)	adoption: 05/01/2012
Effective date if applicable:	5/01/2012
Enterive date it applicable.	(no more than 90 days after amendment file date)
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 amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated 05/01	/2012
Signature	Vatrid & hearie
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	PATRICK MARIE
	(Typed or printed name of person signing)
	CEO
	(Title of person signing)