P110000096473

| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| | | |
| (Ac | ldress) | |
| | | |
| (Ac | ldress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| (e. | -y/ | ~, |
| PICK-UP | TIAW. | MAIL |
| | | |
| (Bu | siness Entity Nar | ne) |
| | | |
| (Do | ocument Number) | |
| Certified Copies | Certificates | s of Status |
| | | |
| Special Instructions to | Filing Officer: | |
| - | g | |
| | | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



800244623118

02/15/13--01007--005 **35.00

SECRETARY OF STATE SAVIETY OF STATE OF

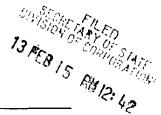
Anana 1001/8/13

COVER LETTER

TO: Amendment Section Division of Corporations

| MAINE OF CORR ORATION. | | A ENTRE | AMIGAS CORP |
|--|----------------------|--|---|
| DOCUMENT NUMBER: P110000 | 96473 | · | |
| The enclosed Articles of Amendment and fe | e are submitted for | filing. | |
| Please return all correspondence concerning | this matter to the f | ollowing: | |
| PABLO B M | UNOZ | | |
| | Name o | f Contact Persor | 1 |
| PALABRA D | E VIDA EN | TRE AMI | GAS |
| | Fin | n/ Company | |
| 15969 NW 6 | 4th AVENU | IE#314 | |
| | | Address | |
| MIAMI, FL.3 | 3014 | | |
| | City/ St | ate and Zip Cod | e |
| | | | |
| E-mail address: | (to be used for futu | re annual report | notification) |
| | | | |
| For further information concerning this matt | er, please cali: | | |
| PABLO B MUNOZ | | at (<u>786</u> | , 312-3208 |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for the following amour | it made payable to | he Florida Depa | artment of State: |
| \$35 Filing Fee \$35 Filing Certificate of S | Status Certifi | 5 Filing Fee & ed Copy onal copy is ed) | □\$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 | | Ameno Divisio Clifton 2661 E | Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301 |

Articles of Amendment to Articles of Incorporation of



PALABRA DE VIDA ENTRE AMIGAS CORP.

| (Name of Corporation as currently filed with the Florida Dept. of State) | ` |
|---|------------------------------|
| P11000096473 | |
| (Document Number of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the Articles of Incorporation: | ne following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| | The new |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation nword "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 t new registered agent and/or the new registered office address: | <u>he</u> |
| Name of New Registered Agent | |
| (Florida street address) New Registered Office Address: Florida | |
| (City) (Zi | ip Code) |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familian with and accept the obligations of the | e position. |
| NIX | |
| 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 | <u>Addres</u> s |
| 1)Change | P | ANA L HERNANDEZ | 15969 NW 64th AVENUE #314 |
| X Add | | | MIAMI, FL. 33014 |
| Remove | | | |
| 2) Change | Р | PABLO B MUNOZ | 15969 NW AVENUE # 314 |
| Add | | ` | MIAMI, FL. 33014 |
| X Remove | | | |
| 3) Change | | | |
| Add | | , | |
| Remove | | A | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | k | |
| Remove | | | |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | |
|--|---|
| ARTICLE V PRESIDENT ANA L HERNANDEZ (ADDED) | |
| PRESIDENT PABLO B MUNOZ (DELETE) | |
| | |
| | _ |
| | _ |
| | |
| | _ |
| | _ |
| | _ |
| | _ |
| | _ |
| | _ |
| | |
| | _ |
| | _ |
| | _ |
| | |
| 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) | |
| | _ |
| | _ |
| <u> </u> | _ |
| | _ |
| | _ |
| | |
| | _ |
| | |

| The date of each amendment(s) a | adoption: 02/12/2013 |
|---|---|
| Effective date <u>if applicable</u> : 2/ | 12/2013 |
| entente date <u>n'appicable</u> . | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| ☐ The amendment(s) was/were act by the shareholders was/were s | lopted 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 reach voting group entitled to vote separately on the amendment(s): |
| "The number of votes cas | t for the amendment(s) was/were sufficient for approval |
| by | (voting group) |
| | (voting group) |
| action was not required. | lopted by the board of directors without shareholder action and shareholder lopted by the incorporators without shareholder action and shareholder |
| Dated 02/12 | 12013 Talle B. Hando |
| (By a | director, president of other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary) |
| | PABLO B MUNOZ |
| | (Typed or printed name of person signing) |
| | PRESIDENT |
| | (Title of person signing) |