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SECRETARY OF STATE
ALLAHASSEE, FLORIDA



COVER LETTER

TO: Amendment Section Division of Corporations

PROTEMAD (NAME OF CORPORATION:	CORPORATION	
P11000099070 DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are su	hmitted for filing	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Amenument and lee are su	omitted for fining.	
Please return all correspondence concerning this man	tter to the following:	
DE LA HOZ, LEONAR	IDO J.	
	Name of Contact Persor	1
548 MARKET ST #25	Firm/ Company	
	Address	
SAN FRANCISCO CA	394104	
	City/ State and Zip Code	2
info@lessargroup.com		
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, pleas	se call:	
DE LA HOZ, LEONARDO J.	786	6234972
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	ertment of State:
\$35 Filing Fee \$\Bigcup \\$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)
Mailing Address		Address
Amendment Section	+	ment Section
Division of Corporations P.O. Box 6327		on of Corporations
Tallahassee, FL 32314		Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PROTEMAD CORPORATION

(Name of Corporation as	currently filed with the Flo	rida Dept. of State)		
	nt Number of Corporation (if k	known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Fl	lorida Profit Corporation ad	opts the following	g amendment(s) to
A. If amending name, enter the new na LESSAR GROUP INC.	ame of the corporation:			m)
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co	o". A professional corpora		
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		· · · · · · · · · · · · · · · · · · ·		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		548 MARKET ST #2	5129	
(Muning undress MAT DE AT OST	OFFICE BOX)	SAN FRANCISCO C	A 94104	
D. If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the nam	ne of the	
Name of New Registered Agent	382 NE 191st ST #25	129		
New Registered Office Address:	(Florida stree	•	33179-3899	
nor registered Office radices.	(City)		(Zip Code)	
New Registered Agent's Signature, if call thereby accept the appointment as registed.	tered agent. I am familiar wi		s of the position.	72
Si	gnature of New Registered Ag	eni, ij cnanging	Ų.⊆	

14 74 2: 14 74 2: SEE. FLOO 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 <math>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.

X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	<u>/ Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	PTD	DE LA HOZ, LEONARDO J.	KR 7B 134B-11 AP 504
/ Add			BOGOTA, COLOMBIA
Remove			
2) Changa	VPSD	ACEVEDO, LUZ C.	KR 7B 134B-11 AP 504
2) Change		 	BOGOTA, COLOMBIA
Remove 3) Change	D	GORDILLO, CESAR A.	BALCONES DEL VERGE
Add			IBAGUE, COLOMBIA
4) Change	D	ALVAREZ, JACQUELIN	BALCONES DEL VERGEI TO 3 AP 202 IBAGUE, COLOMBIA
Remove 5) Change Add			
Remove 6) Change Add Remove		·	

	(Be specific)
	
	
(if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	

The date of each amountments	AUGUST 10th, 2012
The date of each amendment(Effective date if applicable:	AUGUST 10th, 2012
	(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
AUG Dated	UST 28th, 2012
Signature	
(By sel	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	DE LA HOZ, LEONARDO J.
	(Typed or printed name of person signing)
	PRESIDENT, TREAUSURER AND DIRECTOR
	(Title of person signing)