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COVER LETTER

3.

TO: Amendment Section Division of Corporations		•	
NAME OF CORPORATION: DOCUMENT NUMBER:	Kristina A.D.	elgado, In	<u>C</u> .
DOCUMENT NUMBER:	1100001101	3 (
The enclosed Articles of Amenda	nent and fee are submitted f	or filing.	
Please return all correspondence	Knstina	e following: De 19 and 1 cof Contact Person)
	Knistina A.	Delacció,	Inc.
·	18310 NW	82 ud Ct.	
	(Miami) Hialed	ah, FL 33	3015
F. ma	City/S Wachky il address: (to be used for fu	State and Zin Code 1 Styck @ gr	
For further information concerning			.cation)
	ig uns matter, prease can.		
Kristina De	elaado	ar 786	683-9409
Name of Contact	Person	Area Code &	Daytime Telephone Number
Enclosed is a check for the follow	ving amount made payable to	o the Florida Departme	ent of State:
	tificate of Status Cert: (Add	ified Copy litional copy is	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addr		Street Add	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: 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" 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: Name of New Registered Agent (Florida street address) New Registered Office Address:

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.

No A

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) 1) Change Add	Title V	Daniel Delgado	Address 18310 NW 82 nd Ct Haleah, Fl 33019
Remove 2) Change Add			
Remove Change Add Remove			
4) Change Add Remove			
5) Change Add Remove	<u> </u>		
6) Change Add Remove			

Attach additional sheets, if necessary). (Be specific) W/A	If amending or adding additional Articl	les, enter change(s) here:
	(Attach additional sheets, if necessary).	(Be specific)
	N	19
		· · · · · · · · · · · · · · · · · · ·
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	If an amendment provides for an excha	nge, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	(if not applicable indicate N/4)	dment if not contained in the amendment itself:
	1	6
<u> </u>	w ₁ ·	

The date of each amendment(s) adoption:	cember 9,2013	, if other than the
date this document was signed. Effective date if applicable:	cember 9, 2013 o more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK	CONE)	
The amendment(s) was/were adopted by the share- by the shareholders was/were sufficient for approx	cholders. The number of votes cast for the amendment(soval.	s) ·
	reholders through voting groups. The following stateme up entitled to vote separately on the amendment(s):	ent e
"The number of votes cast for the amendmen	nt(s) was/were sufficient for approval	
by	.,,,	
(voting g	roup)	
action was not required.	d of directors without shareholder action and shareholder	≳ T
Dated De Cember Signature	9,2013	
	or other officer - if directors or officers have not been	
selected, by an incorpora appointed fiduciary by th	ntor – if in the hands of a receiver, trustee, or other cour	rt .
	nstina A. Delgado	
-	(Typed or printed name of person signing)	
	(Title of person signing)	