P11000099613

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C. LEWIS OCT 4 2013 EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corporations					
NAME OF CORPORATION: COMPRAS Y ALGO MAS INC DOCUMENT NUMBER: P11000099613					
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
MARIA E GONZALEZ					
Name of Contact Person COMPRAS Y ALGO MAS INC					
Firm/ Company 9421 FONTAINEBLEAU BLVD # 201					
Address					
MIAMI, FLORIDA 33172					
City/ State and Zip Code					
MARYE_GM@HOTMAIL.COM					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
MARIA E GONZALEZ at (305) 721-9864					
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
Sas Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Sas Filing Fee & Certified Copy (Additional Copy is enclosed)					
Mailing Address Street Address					

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 to

FILED

Articles of Incorporation	
(Name of Corporation as currently filed with the Florida Dept. of State) 13 SEP 30 AM I INCRETAR I OF S TALLAHASSEF, FIL	0:44
(Name of Corporation as currently filed with the Florida Dept. of State) TALLAHASSEE, FL	TATE
P11000099613	.URIDA
(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 amend its Articles of Incorporation:	ment(s) to
A. If amending name, enter the new name of the corporation:	
The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviat	
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A."	the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
(Principal Office address MOST 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)	
(t tot au street address)	
New Registered Office Address:, Florida	
(City) (Zip Code)	
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.	
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
Change Add X Remove	PΤ	BELKYS M. ADAMES	4774 NW 97 PLACE DORAL, FL 33178
2) _x Change Add Remove	<u>vr -</u>	MARIA E GONZALEZ	9421 FONTAINEBLEAU BLVD # 201 MIAMI, FLORIDA 33172
3) Change Add Remove	PT	MARIA E. GONZALEZ	9421 FONTAINEBLEAU BLVD # 201 MIAMI, FLORIDA 33172
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove	**************************************	· · · · · · · · · · · · · · · · · · ·	

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(if not applicable, indicate N/A)	t it not co	ntained ii	n the amend	<u>ament itseif:</u>		
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. The date of each amendment		FILED, if other than the
date this document was signed Effective date if applicable:		SECRETARY OF STATE Imentified third AHASSEE, FLORIDA
Adoption of Amendment(s)	(CHECK ONE)	TAN LONIDA
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes one sufficient for approval.	ast for the amendment(s)
	re approved by the shareholders through voting groups of for each voting group entitled to vote separately on	
"The number of votes	cast for the amendment(s) was/were sufficient for app	oroval
by	(voting group)	"
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without sharehold	er action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder ac	tion and shareholder
9/2	26/2013	
Signature(B	y a director, president or other officer – if directors or elected, by an incorporator – if in the hands of a receive pointed fiduciary by that fiduciary)	
	BELKYS M. ADAMES	
	(Typed or printed name of per	son signing)
	PRESIDENT	

(Title of person signing)