P11000102001

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S. HAWKES

AUG - 2012

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Spiritus & Qualitas Corp P11000102001 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Alex Ortiz, CPA Name of Contact Person Suarez, Ceballos, Ortiz & Vega, CPA's Firm/ Company 354 Sevilla Ave Address Coral Gables, FL 33134 City/ State and Zip Code alex@scovcpas.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Alex Ortiz, CPA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

4

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

12 AUG 15 AM 11:32

Articles of Amendment to Articles of Incorporation of

Spiritus & Qualitas Corp		104
(Name of Corporation as currently filed with	th the Florida Dept. of State)	
P11000102001		
(Document Number of Corpo	ration (if known)	
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the follow	ving amendment(s) to
A. If amending name, enter the new name of the corporat	tion:	
		The new
name must be distinguishable and contain the word "cor "Corp.," "Inc.," or Co.," or the designation "Corp," "Incword "chartered," "professional association," or the abbrev	e," or "Co". A professional corporation name mu	abbreviation est contain the
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 and registered agent and/or the new registered office a	ice address in Florida, enter the name of the address;	
Name of New Registered Agent		
(Fit	orida street address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		n.
Signature of New Regi	stered 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 PT John Doe X Remove Y Mike Jones _X Add <u>SV</u> Sally Smith Type of Action Title Name <u>Address</u> (Check One) 354 Sevilla Ave Hernan P. Fernandez Blanco 1) ____ Change Coral Gables, FL 33134 ___ Add Remove Diego M Fernandez Blanco 354 Sevilla Ave 2) ____ Change Coral Gables, FL 33134 __ Add Remove 3) X Change Carla Da Silva 354 Sevilla Ave Coral Gables, FL 33134 Add Remove 4) ____ Change Remove 5) ____ Change ___ Add ___ Remove Change

Add

Remove



f amending or adding additional Articles, enter cl Attach additional sheets, if necessary). (Be specific	hange(s) here:	14
	•	
		-
an amendment provides for an exchange, reclass	sification, or cancellation of issued shares.	
provisions for implementing the amendment if not	t contained in the amendment itself:	
(If not applicable, indicate N/A)		

TALLAMASSEE, FLORIDA

The date of each amendment(s) adoption: August 7, 2012

Effective date if applicable: August 7, 2012

	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.
must be separately provided for	proved by the shareholders through voting groups. The following statement 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	
· <u></u>	(voting group)
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
Dated_X	8/13/12
Signature X	
(By a di	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	Carla Da Silva
• • • • • • • • • • • • • • • • • • •	(Typed or printed name of person signing)
I	President
_	(Title of person signing)