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T. ROBERTS

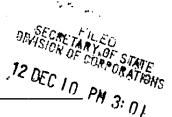
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: EL SIT	TO MOBILE CORPO 04737	ORATION »
The enclosed Articles of Amendment and fe		
Please return all correspondence concerning	this matter to the following:	
DARLYN C.	URDANETA	
	Name of Contact Perso	on
EL SITIO MO	BILE CORPORATI	ION
	Firm/ Company	
1860 SW 8th	STREET	
	Address	
MIAMI, FL 33	3135	
	City/ State and Zip Co	de
elsitiomobile@g	mail.com	
	to be used for future annual repor	rt notification)
For further information concerning this matter	•	202 5420
DARLYN 🚱. URDANETA		₎ 282-5426
Name of Contact Person	Area C	ode & Daytime Telephone Number
Enclosed is a check for the following amoun	t made payable to the Florida Dep	partment of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of S		☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Stree	t 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 **Articles of Incorporation** of



EL SITIO MOBILE CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State)

P11000104737			
(Documer	nt Number of Corporation (if	known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation	adopts the following amendmen
A. If amending name, enter the new na	ame of the corporation:		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	Co". A professional corpo	porated" or the abbreviation
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable: TREET ADDRESS)	N/A	
C. Enter new mailing address, if appliance (Mailing address MAY BE A POST)		N/A	·
D. If amending the registered agent an new registered agent and/or the new			ame of the
Name of New Registered Agent	DARLYN C. URI		
iname of their neglisier early on	1860 SW 8TH S	TREET	_
	(Florida stre	,	_
New Registered Office Address:	MIAMI	, Florid	la 33135
	(City)		(Zip Code)
New Registered Agent's Signature, if c	hanomo Registered Agent:		
I hereby accept the appointment as regist	tered asent. I am familiar w	ith and accept the obligation	ons of the position.
Si	gnature of New Registered A	gent, 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 D	oe .	
X Remove	<u>v</u>	Mike J	ones	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	PD		JORGE AGUIRRE RODRIGUEZ	1860 SW 8th STREET
Add				MIAMI, FL 33135
X Remove				
2) Change	ST		PEDRO SANJUANELO	1860 SW 8th STREET
Add				MIAMI, FL 33135
X Remove				
3) Change	P		DARLYN C. URDANETA	1860 SW 8th STREET
X Add				MIAMI, FL 33135
Remove				·
4) Change				
Add				
Remove				· · · · · · · · · · · · · · · · · · ·
5) Change				
Add				
Remove				-
6) Change				
Add				
Remove				
				

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
N/A	
177	
•	
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
N/A	·
V/A	
V/A	

The date of each amendment(s) adoption: 12/5/2012		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
. Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statement reach 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		
action was not required. The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated 12/5/2	012	
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	DARLYN C. URDANETA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	