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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations P12000010429 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: 160 Address E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 821-0526

Area Code & Daytime Telephone Number 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 Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of
K&Y temploce. Too
(Name of Corporation as currently filed with the Florida Dept. of State)
P12000010429
(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 amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
N/A 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) N (\(\sum_{\text{\tex{\tex
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 Lizenia Padin
6707 NW 169 ST apt Asol (Florida street address)
New Registered Office Address: (City), Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familian with and accept the obligations of the position.
Signature of New Registred 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	
Type of Action (Check One) Title Name Address Change P Claribel Coto 67070W 1691T Add APT-ADD1 Hinleah P Binleah	X Remove	<u>v</u>	Mike Jones	
(Check One) 1) Change Add APT-ASOI Hindeah K 33015 2) Change Add Remove 3) Change Add Remove 4) Change Add Remove 5) Change Add Remove 6) Change Add Add Add Add Add Add Add Add Add Ad	X Add	<u>sv</u>	Sally Smith	
Change P Charbel Coto 67070W 16917 Add APT-ASD1 Hisland Resort Add APT-Aso1 Hisland F(33015 Change Add APT-Aso1 Hisland F(330 Change Add Remove 1 Change Add Remove Change Add Remove Change Add Remove Change Add Add Add Add Add Add Add Add Add Ad		<u>Title</u>	Name	Address
Memore 2)Change P Kineria Padin 6707200 1695T Add APT-Aool Hialeah f(330) 3)ChangeAddRemove 4)ChangeAddRemove 5)ChangeAddRemove 6)ChangeAddRemove		<u>P</u>	Claribel Coto	6707NW 1695T
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3) Change	_	7	Kirenia Padin	
Add	3) Change Add			Hialeah F(33015
AddRemove	Add	<u></u>		
6) Change	Add			
II ama anna	6) Change	<u>-</u>		

	heets, if necessary).	. (Be specific)			
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in amendment n	rovides for an exc	hange, reclassific	cation, or cancell	<u>ition of issued sha</u>	res,
··· wire-interests b	plementing the am	endment if not co	ontained in the ar	nendment itself:	
<u>rovisions for imp</u>	ble, indicate N/A)				
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The date of each amendment(s) as late this document was signed.	loption:	, if other than the
Effective date <u>if applicable</u> :		
	(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	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
The amendment(s) was/were app must be separately provided for	roved 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	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add 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	08/14/15	
Signature	(Jall)	
(By a diselected	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)	····
	Clasibel Coto (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	-