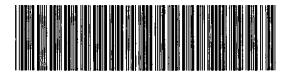
P12000019563

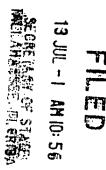
(Re	equestor's Name)			
(Ac	ddress)			
(Ac	ldress)			
(Ci	ty/State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL		
(Bu	usiness Entity Nar	me)		
(Document Number)				
Certified Copies	Certificate:	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



600249313256

07/01/13--01049--004 **43,75



C. LEWIS

JUL 8 2013

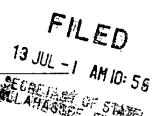
EXAMINER

COVER LETTER

Division of Corpor				
NAME OF CORPORA	ATION: IKAPA CO	RP		
DOCUMENT NUMBI	ER: P1200001956	3		
	f Amendment and fee are su			
Please return all corresp	ondence concerning this ma	tter to the following:		
,	AMADEO MAZZO	OLINI		
_		Name of Contact Persor	1	
<u>,</u>	AMADEO MAZZ	OLINI		
		Firm/ Company		
,	AMADEO A. MAZ	ZZOLINI PA		
-		Address		
	2069 NE 163 ST	, MIAMI FL 3316	52	
	- · · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code	e	
ΔΔΛ	//AZZOLINI@HO	TMAIL COM		
7011		sed for future annual report	notification)	
			,	
For further information	concerning this matter, pleas	se call:		
AMADEO MA	ZZOLINI	at (786	, 290-5055	
Name of	Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address			Address	
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
	hassee, FL 32314	2661 Executive Center Circle		
		Tallaha	assee, FL 32301	

Articles of Amendment Articles of Incorporation of

IKAPA CORP



(Name of Corporation as current	ily med with the Florida D	ept. or state)	唯一和	Or ~
P12000019563 (Document Number	er of Corporation (if known)			ERIM
ursuant to the provisions of section 607.1006, Floral Section 607.1006,	•		adopts the following	amendment(s
If amending name, enter the new name of the	ne corporation:			
				The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Covord "chartered," "professional association," or	Corp," "Inc," or "Co". A			
B. Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u> .				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u> </u>			
D. If amending the registered agent and/or reg new registered agent and/or the new registered		lorida, enter the na	ime of the	
	ered office address:			
Name of New Registered Agent		.	- -	
	(Florida street addre	ss)	_	
New Registered Office Address:	(City)	, Florid	a	
	(City)		(Zip Coue)	
New Registered Agent's Signature, if changing hereby accept the appointment as registered age		accept the obligation	ons 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 De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	mith_	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	VP		MARIANA INES REGALES HARRINGTON	540 SOUTH PARK DR # 9-12
X				HOLLYWOOD FLORIDA 3302
Remove				
2) Change				
Add				
Remove				-
3) Change	<u> </u>			· · · · · · · · · · · · · · · · · · ·
Add				
Remove				
4) Change		_ _		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Artical Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
 	
If an amendment provides for an exch provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
 	

The date of each amendment	(s) adoption: JUNE 26 2013	FUE
Effective date if applicable:		13 JIII - ED
in applicable	(no more than 90 days after amendment file	AM 10: 56
Adoption of Amendment(s)	(CHECK ONE)	All
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the re sufficient for approval.	e amendment(s)
	e approved by the shareholders through voting groups. The fold d for each voting group entitled to vote separately on the amen	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
= • · · · · ·		
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action	and shareholder
☐ The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and s	shareholder
Dated JUN	NE 26 2013	
Dateu	1	
Signature	MINI	`
I B	y a director, president or other officer - if directors or officers	
	lected, by an incorporator – if in the hands of a receiver, trusted oppointed fiduciary by that fiduciary)	e, or other court
ар		
	ALEJANDRO CESAR NOZIGLIA	WILDE
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	