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(Re	equestor's Name)
(Ac	ddress)
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(Ci	ity/State/Zip/Phone #)
(Bı	usiness Entity Name)
(D0	ocument Number)
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R. WHILE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _____

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DOCUMENT NUMBER: _____

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

EULALIA R RAXACH

Name of Contact Person

ON TIME ACCOUNTING TAX INC

Firm/ Company

721 E 48 ST

Address

HIALEAH, FL. 33015

City/ State and Zip Code

laly@ontimeaccountingtax.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 EULALIA R RAXACH
 at (786)
 247-7224

 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:

\$35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status Statistical States (Additional copy is enclosed)

□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing 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

Street Address

	Articles of Amendment	
	to Articles of Incorporation of	16-SEP -9 PH 5: 17
HARMA INGREDIENTS AND CONSULTING		SECRETARY HE LEATE
(Name of Corpor	ration as currently filed with the F	
12000021766		
(Do	cument Number of Corporation (if ki	nown)
rsuant to the provisions of section 607.1006. Flo Articles of Incorporation:	rida Statutes, this <i>Floridu Profit Cor</i>	<i>poration</i> adopts the following amendmer
If amending name, enter the new name of the	e corporation:	The new
me must be distinguishable and contain the v Corp.," "Inc.," or Co.," or the designation "Co ord "chartered," "professional association." or	orp," "Inc," or "Co". A professio	or "incorporated" or the abbreviation
. <u>Enter new principal office address, if applica</u> Principal office address <u>MUST BE A STREET A</u>		
. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE</u>	<u>BOX</u>)	
If amending the registered agent and/or reginnew registered agent and/or the new registered agent and/or the new registered agent		iter the name of the
	(Florida street address)	
	(110) (((13)) ((10)) ((13))	

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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:

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<u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address
1) Change	P	GILBERTO DIAZ	1820 NW 140 TERR
XAdd			PEMBROKE PINES, FL 33028
Remove			<u> </u>
2) Change			
Add			
Remove			
3) Change		<u> </u>	<u> </u>
Add			
Remove			
4) Change			
Add			<u> </u>
Remove			
5) Change			
Add			
Remove			
6) Change			<u></u>
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendment(s) at date this document was signed.	loption:, if other than the
-	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more man yo adds after americaneni fre dale)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
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.
	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 add action was not required.	pted by the incorporators without shareholder action and shareholder
09/01/2016 Dated	
Ø	<i>()</i>
Signature 11	rector, president or other officer – if directors or officers have not been
selecte	d, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	DANYS MARTINEZ
	(Typed or printed name of person signing)

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i.

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(Title of person signing)

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