## P1200027348

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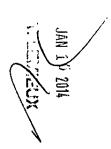
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: TERRA M	OBILE INC			
DOCUMENT NUMBER: P1200002724	48			
The enclosed Articles of Amendment and fee are s				
Please return all correspondence concerning this ma	atter to the following:			
REGINA MEDEI	ROS			
CSG - CAPITAL	Name of Contact Person SERVICES GROUP INC			
	Firm/ Company			
446 W HILLSBORO BLVD				
Address				
DEERFIELD BEACH, FL 33441				
	City/ State and Zip Code			
regina@thewaygrou	p.biz			
E-mail address: (to be u	used for future annual report notification)			
For further information concerning this matter, plea	ase call:			
REGINA MEDEIROS	at (954 ) 427-4770  Area Code & Daytime Telep			
Name of Contact Person	Area Code & Daytime Telep	hone Number		
Enclosed is a check for the following amount made	payable to the Florida Department of State:			
□ \$35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee & Certificate of St Certified Copy (Additional Copy is enclosed)	atus		
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 Circ Tallahassee, FL 32301	sle		

## Articles of Amendment to Articles of Incorporation of

## TERRA MOBILE INC

(Name of Corporation as currently filed with the Flo	rida Dept. of State)	
P12000027248  (Document Number of Corporation (if k	noum	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatis</i> Articles of Incorporation:	•	g amendment(s) to
A. If amending name, enter the new name of the corporation:		
TERRA FONE INC		The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must c	breviation
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 address new registered agent and/or the new registered office address:	s in Florida, enter the name of the	31 / 18 14 / 18 18 / 18
Name of New Registered Agent		JAN
(Florida street	t address)	6- AWA
New Registered Office Address:	, Florida	
(City)	(Zip Code)	OF STATE REPORTATION  AM II: 47
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wit  Signature of New Registered Agent		•

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file d	ate)
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The follomust be separately provided for each voting group entitled to vote separately on the amenda	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action ar action was not required.	nd shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sh action was not required.	areholder
Dated_JANUARY 02, 2014	
Signature 1 Januar Carra de Du	Louise.
(By a director, president or other officer – if directors or officers has selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	
NEYMAR C DE LIMA	
(Typed or printed name of person signing	))
PRESIDENT	
(Title of person signing)	