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From:

Account Name : PADRON AND ASSOCIATES INC.

Account Number : I20060000156

Phone : (305)818-0404

Fax Number

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COVER LETTER

TO:	Amendment Section
	Division of Corporations

Division of Corpo	attons		
	ATION: Nuevo Olar ER: P1200002914		nc
	f Amendment and fee are sul		
Please return all corresp	ondence concerning this mat	ter to the following:	,
	Frank De La Paz		
-		Name of Contact Person	1
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For further information	concerning this matter, pleas	e call:	
Frank De La l	Paz	at(305	, 596-5655
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment of State:
\$35 Filing Fee	□\$43.75 Filling 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)
Ame Divis P.O.	ing Address indment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to

FILED

13 MAY 16 PM 4:40 Articles of Incorporation Nuevo Olancho Cafeteria Incsecretary of STATE: (Name of Corporation as currently filed with the Florida Dept. of State ALLAHASSEE, ELORIDA P12000029148 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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) 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 (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations 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.

X Change	PT John	PT John Doe		
X Remove	<u>V</u> <u>Mik</u>	e Jones		
_X Ađd	<u>SV</u> <u>Sall</u>	y Smith		
Type of Action (Check One)	Title	Name	Address	
1) Change	PSD	Leandro Fernandez	1864 SW 8th St	
Add			Miami FI 33135 USA	
X Remove				
2) Change	PTD	Osnely Gonzalez	1864 SW 8th St	
X			Miami FI 33135 USA	
Remove				
3)Change	<u>VPS</u>	Jorge Rodriguez	1864 SW 8th St	
X Add			Miami Fl 33135	
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove		÷		
6) Change				
Add				
Remove				

	i <mark>cles, enter change(s) here</mark> : (Be specific)
N/A	
	,
	,
<u> </u>	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, indment if not contained in the amendment itself:
DINAMOINMOIN WINDIGHT INTERNIT	doment is dot contained in the smendment lisen.
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A) N/A	
(if not applicable, indicate N/A)	

The date of each amendment(s)	adoption: 05/15/2016
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 a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
The amendment(s) was/were a must be separately provided f	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder
The amondment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated 05/15	5/2013
Signature	EH .
selec	a director, president or other officer - if directors or officers have not been sted, by an incorporator - if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)
	Leandro Fernandez
	(Typed or printed name of person signing)
	Incorporator
	(Title of person signing)