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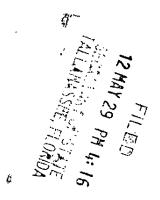
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: the paradisc	e works #1 inc	
DOCUMENT NUME	_{BER:} p12000039177	7	
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corres	spondence concerning this mat	ter to the following:	
	duelson c santos		
		Name of Contact Person	
	the oaradise work		
	the datacise work		
	0000!	Firm/ Company	
	8329 se camelia o		
		Address	
	hobe sound inc		
		City/ State and Zip Code	2
	E-mail address: (to ba us	ed for future annual report	notification)
	is-man address. (to be us	ed for fature annual report	notification)
		11	
For further information	n concerning this matter, pleas	e call:	
duelson c sa	ntos	_{at (} 772	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	ertment 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)
Amo Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the F	Florida Dept. of State)		
p12000039177			
(Document Number of Corporation (i	if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
paradise works 1 inc	The new		
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	'Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	8329 se camelia dr		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	hobe sound fl 33455		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	p o box 614		
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address			
Name of New Registered Agent n/a			
	reet address)		
	reet adaress)		
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 familiar Signature of New Registered	with and accept the obligations of the position.		

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 <math>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	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add Remove			
2) Change Add Remove			
3)Change Add Remove			
4) Change Add Remove			
5) Change Add Remove	 .		
6) Change Add Remove			

	g or adding additional Ar itional sheets, if necessary)		<u>ce(s) here</u> :		
n/a					
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provisions (if not	dment provides for an exess for implementing the am tapplicable, indicate N/A)	change, reclassific tendment if not co	ation, or cancellas ntained in the am	tion of issued share endment itself:	<u>.s.</u>
n/a			 	· · · · · · · · · · · · · · · · · · ·	
					
		 			
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The date of each amendment	(s) adoption: 05/22/2012
Effective date if applicable:	05/22/2012
листиче инсе <u>и аррисави</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes east for the amendment(s) are sufficient for approval.
	e approved by the shareholders through voting groups. The following statement d for 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)
action was not required.	re adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
se	y)a director, president or other officer – if directors or officers have not been elected by an incorporator – if in the hands of a receiver, trustee, or other court
ap ,	DUELSON C. SANTOS (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)