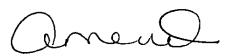
P120000 48956

(Re	equestor's Name)	
(Ac	idress)	 .
(Ac	idress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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9/27/12

COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION:	YUPI REDUTY
DOCUMENT NUMBER:	1200040956
The enclosed Articles of Amendment and	fee are submitted for filing.
Please return all correspondence concernir	ng this matter to the following:
JO	SE MILLIAN AVENDANO
	Name of Contact Person YUPI RESUTY
34	08 W 84 ST #110
H	IDLEDH, FL. 33018
	City/ State and Zip Code Mayer Janopa Eguail. com : (to be used for future annual report notification)
For further information concerning this ma	itter, please call:
DOSE W. DV	ENDONO at 786, 399-7293
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	unt made payable to the Florida Department of State:
\$35 Filing Fee S43.75 Filing Certificate of	
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 Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Tu of

FILED 2012 SEP 26 PM 12: 29

(Name of Corporation as currently filed with the Florida Dept. of State)

P1200048956

ALLINE SSEE, FLORIDA

(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:

	<u>corporation:</u>	tion
word "chartered," "professional association," or the		ine
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET AL		٢
	HIPUEPH FL. 33018	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u> </u>	
D. If amending the registered agent and/or registered agent and/or the new registered	tered office address in Florida, enter the name of the ed office address:	
Name of New Registered Agent	***************************************	
Name of New Registered Agent	(Florida street address)	
Name of New Registered Agent New Registered Office Address:	, Florida	
	,	
New Registered Office Address: New Registered Agent's Signature, if changing R	(City) , Florida(Zip Code)	. ·

	ts, if necessary).	icles, enter change (Be specific)			
					· · · · · · · · ·
***************************************					_
					
,					
4. v					

16	vides for an excl	hange, reclassifica	tion, or cancellation	of issued shares,	
II an amendment prov	nenting the ame	endment if not con	tained in the amend	ment itself:	
provisions for implen	indicate N/A)				
provisions for implen	indicate N/A) ·				
provisions for implen	indicate N/A)				
provisions for implen	indicate N/A)				
provisions for implen (if not applicable,	indicate N/A)				
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provisions for implen (if not applicable,	indicate N/A)				
provisions for implen (if not applicable,	indicate N/A)				
provisions for implen (if not applicable,	indicate N/A)				-

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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
X Add	VP		RICARDO QUINTERO	3004 RUCKBRIDE PULL
Remove				MORNETTA GEORGIA 30066
2) Change			•	
Add		,		
Remove 3) Change				
Add				
Remove		• •	•	
4) Change		_		
Add Remove				
Add				
Remove				
δ) Change		_		
Add				· · · · · · · · · · · · · · · · · · ·
Remove				

The date of each amendment(s) ad	loption: 9-01-13
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado 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)
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
Dated	9/21/2012/
Signature	
(By a diselected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
,	JOSE W. AVENDONO
	(Typed or printed name of person signing)
	FRESIDENTE.
	(Title of person signing)