P/20005367/

(Re	questor's Name)
(Ad	dress)
(Ad	idress)
(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	isiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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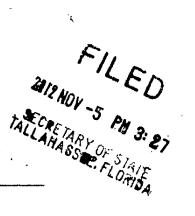
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SKYLINE 412	2, INC.	
DOCUMENT NUMBER: P12000052671		
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
Alvaro Castillo		
	Name of Contact Person	η
Castillo and Associate	es	
	Firm/ Company	
1390 Brickell Ave, Ste	200	
	Address	
Miami, FL 33131		
	City/ State and Zip Cod	e
nicole@overseas-solution	S.COM used for future annual report	
E-man address. (to be t	ised for future annual report	notification)
For further information concerning this matter, plea	ase call:	
Alvaro Castillo	, , , , , , , , , , , , , , , , , , ,	2715540
Name of Contact Person	at (305	de & Daytime Telephone Number
Name of Contact reison	Alea Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State;
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (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 Tallabasses, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



SKYLINE 412, INC.	
(Name of Corporation as currently filed with the I	Clorida Dept. of State)
P12000052671	
(Document Number of Corporation (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:	
N/A	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	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
	5
Name of New Registered Agent N/A	
/Classide st	reet address)
(Fioriau Sil	reet auuress)
New Registered Office Address: (City)	Florida(Zip Code)
(Cig)	(εφ τωε)
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.
O' A A A A A A A A A A A A A A A A A A A	drawa (F. drawa)
Signature of New Registered	Ageni, ij 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: X Change	M	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	
1) Change	D	JESUS GOMEZ	1390 Brickell Ave, Ste 200	
Add			Miami, FL 33131	
X Remove				
2) Change	D	JOHNNY GOMEZ	1390 Brickell Ave, Ste 200	
X Add			Miami, FL 33131	
Remove				
3) Change	·			
Add			AND ADDRESS OF THE PARTY OF THE	
Remove				
4) Change			*	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add		. —		
Demove				

<u>. II</u> (Ai	amending or adding additional Articles, enter change(s) here: ttach additional sheets, if necessary). (Be specific)
v/A	
, ,,,,,,	
. <u>lf</u>	an amendment provides for an exchange, reclassification, or cancellation of issued shares,
Ħ	rovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
V/A	
~~~	

The date of each amendment(s) adoption:		
Effective date if applicable: \0-23.20\Z		
(no more than 90 days after amendment file date)		
Adoption of Amendment(s) (CHECK ONE)		
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.		
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)		
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.		
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.		
Dated October 23, 2012		
Signature		
(By a director, president or other officer – if directors or officers have not been splected, by an incorporator – if in the hands of a receiver, trustee, or other court		
appointed fiduciary by that fiduciary)		
Jesus Gomez		
(Typed or printed name of person signing)		
Director		
(Title of person signing)		