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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: RERW	INC
DOCUMENT NUMBER: P12000	058 427
The enclosed Articles of Amendment and fee are sub	omitted for filing.
Please return all correspondence concerning this matt	ter to the following:
	Name of Contact Person
	AH GWagency
900	S.W & Street - Suite C-2
<u> </u>	liami, Fl 33130
	City/ State and Zip Code
E-mail address: (to be use	amawaalnu com ed for future annual report potification)
For further information concerning this matter, please	e call:
Maria Cristina Noya Name of Contact Person	at ( <u>305</u> ) <u>905 - 11 71</u> Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	ayable to the Florida Department of State:
□ \$35 Filing Fee	Certified Copy (Additional copy is enclosed)  Captiling Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment

to

**Articles of Incorporation** 

REPULTINC	
(Name of Corporation as currently filed with the F	orida Dept. of State)
P12 000058	427
(Document Number of Corporation (if	
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:	
u/A	The new
name must be distinguishable and contain the word "corporation "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: (Principal office address MUST BE A STREET ADDRESS)	N/A
	· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A P
•	FILE PH
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	
Name of New Registered Agent Name of New Registered Agent	
(Florida str.	eet 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 v	with and accept the obligations of the position.
Signature of New Registered A	Igent, 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.

Francis	, ana sai	ny smiin, sv as an Aaa.	·
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>Address</u>
1) Change	D	Anielly Maia	20533 BISCAGNEBLY
Add	•	<b>y</b>	Acartier of T
Remove		•	HVENTUPA, PL 33/80
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add		•	
Remove			
5) Change			
Add			
Remove			
6) Change		·	
Add			
Remove			

(Attach additional sheets,	if necessary).	les, enter change (Be specific)	(s) nere.	
			N/A	
				•
				·
		•		
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lf an amendment provid	les for an excha	nge reclassificat	tion or concellation o	ficened shares
H all amendment provid	nting the amen	dment if not con	tained in the amendm	ent itself;
provisions for impleme				
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The date of each amendment(s) ad	doption: September 6, 2012
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adortion of Amendment(s)	(CHECK ONE)
ne amendment(s) was/were ado by the shareholders was/were sur	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved 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)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated9/	06/12/
Signature	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
selected	irector, president of 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)
	Edward DeValle
	(Typed or printed name of person signing)
	<u> </u>
	(Title of person signing)