## P1200000831

(Re	equestor's Name)	
(Ad	dress)	<del></del> .
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(Cit	ry/State/Zip/Phone	e #)
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SECULIA STATEMENT AS DEC 12 PH 12: 15

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Amend (a) 12.18.13

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: OGES INC. DOCUMENT NUMBER: P12000066831 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JANE MAIA Name of Contact Person DUVEKOT CORPORATION Firm/ Company 200 S ANDREWS AVENUE, SUITE 101 Address FORT LAUDERDALE, FL 33301 City/ State and Zip Code ADMIN@DUVEKOT.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JANE MAIA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



## OGES INC.

(Name of Corporation as currently	y filed with the Florida l	Dept. of State)	· <del>-</del>	· ' / 🍇
P12000066831				
(Document Number	of Corporation (if known	)		
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this <i>Florida</i>	Profit Corporation add	opts the following	g amendment(s) t
A. If amending name, enter the new name of the	corporation:			
				The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or to	orp," "Inc," or "Co". A			
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A)				
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE L</u>	BOX)			
D. If amending the registered agent and/or registered agent and/or the new registered		lorida, enter the name	e of the	
Name of New Registered Agent				
<del></del>	(Florida street addre	uss)		
New Registered Office Address:	(Citv)	, Florida	(Zip Code)	
	(0.0)		, 1.10	
New Registered Agent's Signature, if changing R. I hereby accept the appointment as registered agent		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.

Example: X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PDST	Jhon Fredy Montoya Escude	671 NW 4TH AVENUE
Add			SUITE C19
Remove			FORT LAUDERDALE, FL 33311
2) Change	DPSI	William Andres Parra	671 NW 4TH AVENUE
Add			SUITE C19
Remove			FORT LAUDERDALE, FL 33311
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary)	rticles, enter chan ). (Be specific)			
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f an amendment provides for an exc provisions for implementing the am	change, reclassific tendment if not co	ation, or cancellati ntained in the ame	on of issued shares, ndment itself:	
(if not applicable, indicate N/A)				_
				· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Effective date if applicable:  (no more than 90 days after amendment file date)	
(no more than 90 days after amenament 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)	
(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 11/05/2013	
Signature	
(By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
JHON FREDY MONTOYA ESCUDERO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	