CAPITAL CONNECTION

https NO. 1593 biz. P. 1 ripts/efficovnexe

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(((H12000228277 3)))



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Division of Corporations

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Account Name : YOUR CAPITAL CONNECTION, INC.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN T.H. BUSINESS, INC.

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Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$43.75





September 17, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

T.H. BUSINESS, INC. 2310 COUNTRY CLUB PRADO CORAL GABLES, FL 33134

SUBJECT: T.H. BUSINESS, INC.

REF: P12000076493

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please correct name of officer to be removed, our records show Maria Teresa Herrera.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Sylvia Gilbert Regulatory Specialist II FAX Aud. #: H12000228277 Letter Number: 412A00023342

RECEIVED 12 SEP 18 AM 8: 02 SEP. 18. 2012 9:30AM CAPITAL CONNECTION

NO. 1593 P. 3

Articles of Amendment Articles of Incorporation

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21/2 SEP 18		2 -
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	of	MLLAHA	111)
T.H. BUSINESS, INC.			SEE FLORIS
(Name of Corporation as currently fi	led with the Florida Dept	. of State)	
P12000076493			_
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Floridate to Articles of Incorporation:	ı Statut es , this <i>Florida Pro</i>	fit Corporation adopts th	e following amendment
A. If amending name, enter the new name of the co	rporation:		
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	," "Inc," or "Co". A pro	uny," or "incorporated" ofessional corporation n	The new or the abbreviation ame must contain the
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET ADD</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>		
D. If amending the registered agent and/or register new registered agent and/or the new registered		ida, enter the name of th	<u></u>
Name of New Registered Agent			
Name of New Registered Agent	(Florida street address)		
Name of New Registered Agent New Registered Office Address:	(Florida street address) (City)	, Plorida	o Code)

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, Solly 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.

X Change	PT John Doe	
X Remove	V Mike Jones	•
X Add	SY Sally Smith	
Type of Action (Check One)	Title Name	<u>Address</u>
!) Change	P/D MARIA TERESA H	ERRERA 2310 Country Club Prado
Add		CORAL GABLES FL 33134
X Remove		
2) Change	P/D/S TERESA HEF	RRERA 3905 RIVIERA DRIVE
X Add		CORAL GABLES FL 33134
Remove		
3)Change	AS FRANK RS F	ABRE 2310 COUNTRY CLUB PRADO
Add		CORAL GABLES FL 33134
X Remove		·
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

The state of the s	ticles, enter change(s) here: . (Bs specific)
_	
,	
on omendment providet for an eye	change, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	· .
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

The data of each amendment(6) adoption	
Effective date if applicables	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.
	ry the shareholders through voting groups. The following statement sting group entitled to vote separately on the amendment(s):
7	amendment(a) was/were sufficient for approval
by	(voting group)
_	the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder
Dated 09/17/12	
selected, by an appointed fidus	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court sizery by that fiductory) NK FABRE
	(Typed or printed name of person signing)
Sec.	·
	(Tifle of person signing)