P120000081408

(Re	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	e #)
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11/19/12--01043--011 **35.00

SECRETARY OF STALLOWS DIVISION OF CORPORALIONS

Amend 11/21/12

COVER LETTER

TO: Amendment Section : Division of Corporations

NAME OF CORPOR	RATION: MID UNION	I INVESTMENT	S, INC
DOCUMENT NUME	BER: P1200008160	8	
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	MARIA G QUINC	ENO BEDOYA	
		Name of Contact Person	n
		Firm/ Company	
	500 CRESTYNG	• •	T 1
	OBLANDO EL 22	Address	
,	ORLANDO, FL 32	City/ State and Zip Cod	e
	E-mail address: (to be use	ed for future annual report	notification)
For further information	n concerning this matter, please	e call:	
MÁRIA G QL	JICENO BEDOYA	at (407	, 595-2308
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made p	ayable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301



Articles of Amendment to Articles of Incorporation of

MID UNION INVESTME	NTS, INC		
(Name of Corporation as P12000081608	s currently filed with the Fl	orida Dept. of State)	
	nt Number of Corporation (if	known)	
·	•	Florida Profit Corporation adopts the following	amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
N/A			The new
	nation "Corp," "Inc," or "C	n," "company," or "incorporated" or the abb Co". A professional corporation name must co P.A."	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		500 CRESTYNG OAKS CIR UNIT 1	
		ORLANDO, FL 32824	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		500 CRESTYNG OAKS CIR UNIT 1	
		ORLANDO, FL 32824	
D. If amending the registered agent an new registered agent and/or the new	d/or registered office address:	ess in Florida, enter the name of the	
Name of New Registered Agent	N/A	W	
	(Florida stre	· · · · · · · · · · · · · · · · · · ·	
<u>New Registered Office Address:</u>	(City)	KS CIR UNIT 1, Florida 32824 (Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the obligations of the position.	
Si	gnature of New Registered A	gent, 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	<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>	Name	<u>Addres</u> s
1) Change	VP	LINA M ARCILA	500 CRESTYNG OAKS CIR UNIT 1
X			ORLANDO, FL 32824
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Damova			

E. <u>If amending or adding additional A</u>	articles, enter change(s) here:
(Attach additional sheets, if necessary	y). (Be specific)
N/A	
•	
- · · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an expressions for implementing the ar	xchange, reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:
(if not applicable, indicate N/A))
N/A	

The date of each amendment(s)	adoption: NOVEMBER 14, 2012
Effective date if applicable:	NOVEMBER 14, 2012
Enterive date it appreciate.	(no more than 90 days after amendment file date)
. Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder
_{Dated} NOV	EMBER 14, 2012
Signature &	Adirector, president or other officer – if directors or officers have not been
selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	MARIA G QUICENO BEDOYA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)