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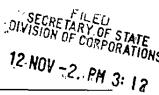
COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Homey, Inc. DOCUMENT NUMBER: P12000083234 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Odalys E. Anton Name of Contact Person Homey, Inc. Firm/ Company 410 Conservation Dr. Address Weston, FL. 33327 City/ State and Zip Code odalys.anton@homey.com.co E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Odalys E. Anton Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **□\$43.75** Filing Fee & □\$52.50 Filing Fee □ \$35 Filing Fee **\$43.75** Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Homey, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P12000083234 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: N/A Name of New Registered Agent (Florida street address) New Registered Office Address: (City)

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.

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 <math>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	<u>Doe</u>		
X Remove	<u>V</u> <u>Mike</u>	Mike Jones		
X Add	SV Sally	<u>Smith</u>		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) X Change	PCEOD	Odalys E. Anton	410 Conservation Dr.	
Add			Weston, FL. 33327	
Remove				
2) Change	VCTOD	Jose L. Anton	410 Conservation Dr.	
X Add			Weston, FL. 33327	
Remove	TCOOD	Marilyn I Torano	9030 NW 145 Ln.	
3) Change		Marilyn J. Torano		
X Add Remove	,		Miami Lakes, FL. 33018	
4) Change	CFOD	Carlos J. Chacon	1318 Veracruz Ln.	
X Add			Weston, FL. 33327	
Remove			,	
5) Change	SCAOD	Elsi Marin	1318 Veracruz Ln.	
XAdd			Weston, FL. 33327	
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Arti	cles, enter chang	<u>te(s) here</u> :				
(Attach additional sheets, if necessary).	(Be specific)					
N/A						
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F. If an amendment provides for an exch provisions for implementing the amer	ange, reclassifica	ation, or cand	<u>cellation of i</u>	ssued share	<u>s.</u>	
(if not applicable, indicate N/A)	iument ii not co	ntamen ur tu	<u>e amenumei</u>	it itsen:		
N/A						
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The date of each amendment(s) a	doption: 10/21/2012
Effective date if applicable:	0/21/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were adby the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach 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)
action was not required. The amendment(s) was/were ad-	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
action was not required.	•
Dated 10/23/	2012
Datou	
Signature	
(By a c	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court ated fiduciary by that fiduciary)
	Odalys E. Anton
	(Typed or printed name of person signing)
	President
	(Title of person signing)