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Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations Fax Number : (850)617-6380

EVED	25 AN 10: 17	From: Account Name : AGI REGISTERED AG Account Number : I20000000205 Phone : (305)416-6800 Fax Number : (305)416-6811		2015 MAY 20	
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## COR AMND/RESTATE/CORRECT OR O/D RESIGN FS 52B HOLDINGS, INC.

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## COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION: \_\_\_\_\_\_\_\_

DOCUMENT NUMBER: P12000085172

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Diane M. Hernandez

Name of Contact Person Adams Gallinar, P.A. Firm/ Company

1000 Brickell Avenue, Suite 300

Address

Miami, Florida 33131

City/ State and Zip Code

dhernandez@agilaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Diane M. Hernandez	, 305 416-6800
	AT ())
Name of Contact Person	Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

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	÷·· ·	Améndment 👾 🕫	20
	to Articles of In-	corporation	2015 MAY
	of FS 52B HOL	f	
(Name of C		thy filed with the Florida Dept. of State)	- <b>2</b>
P12000085172	<u></u>	ارت. ام ا	
	(Document Number o	of Corporation (if known)	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	5, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment	ြ (s) teသ
A. If <u>smending name</u> , enter the new name of	of the corporation:		
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	n "Corp," "Inc," or	The new on." "company." or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."	
B. Enter new principal office address, if ar	mlicable:	1000 Brickell Avenue	
(Principal office address MUST BE A STRE		Suite 300	
		Miami, Florida 33131	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		1000 Brickell Avenue	
		Suite 300	
,		Miami, Florida 33131	
D. If amending the registered agent and/or new registered agent and/or the new re-			
Name of New Registered Agent	JI Registered Agents, 1	Inc	
10	00 Brickell Avenue, Su	uite 300	
		trees address)	
New Registered Office Address:	ami	, Florida	
		(City) (Zip Code)	

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## 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)

Example:

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.

<u>X</u> Change	<u>PT</u>	John Doe		
<u>X</u> Remove	<u>ν</u>	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	DPST	Jesus C. Monzant	1395 Brickell Avenue	
Add			14th Floor	
X Remove			Miami, Florida 33131	
2) Change	DPST	Carlos Ramirez Trejo	1000 Brickell Avenue	
Add			Suite 300	
Remove			Miami, Florida 33131	
3) Change	<u> </u>	<u> </u>		
Add			<u></u>	
Remove				
4) Change		·····		
Add				
Remove				
5) Change				
Add	·			
Remove				
6) Change		<u> </u>		
Add				
Remove			,,,	

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	(Be specific)
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an amendment provides for an exch provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment faself:
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	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the b	block does not meet the applicable statutory filing requirements, this date a Department of State's records.	vill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ON E</u> )	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	51	
	(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.	dopted by the incorporators without shareholder action and shareholder	
May 22, Dated	2015	
Signature	Redout	
selec	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Robert R. Adams, Esq.	
	(Typed or printed name of person signing)	<u>,</u>
	Authorized Representative	
	(Title of person signing)	······································