Page 1 of 1

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H130001408163)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Eax Number : (850)617-6380

From:

Account Name : G & A ACCOUNTING AND TAXES SERVICES, INC.

Account Number : 120120000033 Phone : (305)801-5394

Fax Number : (786)231-5720

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN

AA PREMIUM INVESTMENTS CORP

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$35.00 |

Electronic Filing Menu Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation of

| AA PREMIUM INVESTM | | | | |
|---|---|---|------------------------|----------|
| (Name of Corporation as current) | y filed with the F | lorida Dept. of State) | | |
| P12000090391 | · N 1 rc | | | |
| (Documen | t Number of Corpo | oration (if known) | | |
| Pursuant to the provisions of section 617. amendment(s) to its Articles of Incorporat | | tes, this Florida Not For Profit Corporatio | n adopts the following | g |
| A. If amending name, enter the new na | me of the corpora | tion: | • | |
| N/A | | | The new | |
| name must be distinguishable and contain "Company" or "Co." may not be used in | | ration" or "incorporated" or the abbreviati | on "Corp." or "Inc." | , |
| B. Enter new principal office address, (Principal office address MUST BE A ST | | <u>N/A</u> Σ) | | |
| | | | | |
| C. Enter new mailing address, if appli (Mailing address MAY BE A POST C | cable: | N/A | | |
| {Multing uddress MALBEAFOSIC | TEFICE BOA | | | |
| | | | | 20 |
| | | | | 2013 JUN |
| D. If amending the registered agent an new registered agent and/or the new | d/or registered of v registered office | fice address in Florida, enter the name of address: | the HASS | UN 20 |
| Name of New Registered Agent: | N/A | | E.O. | |
| | | | | AH 10: |
| 1000 | | (Florida street address) | JAN TAN | 2 |
| New Registered Office Address: | N/A | | 210 | Ν̈́ |
| | IN/A | y) , Florida | | |
| | (C.11) | y (zip code) | | |
| New Registered Agent's Signature, if ch I hereby accept the appointment as registe | | d Agent: familiar with and accept the obligations of t | he position. | |
| | | | | |
| Sig | nature of New Reg | istered Agent, if changing | | |

06/20/2013 10:21

TO:18506176380 FROM:7862315720

Page: 3

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 = ChiefExecutive 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 X.Remove X.Add | PT John V Mike SV Sally | Doe Jones Smith | |
|----------------------------------|--|-----------------------|--------------------------------------|
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) X Change | P-D | ANTONIO CANAVES | Calle Cerro Domingo Vicente, 30. 1 E |
| Add | | | Paracuellos de Jarama |
| Remove | | | 28860.Madrid España |
| 2) Change | Management of the Control of the Con | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | , <u></u> |
| Add | | | |
| Remove | | | |
| 4)Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| . If amending or adding additional Arti (attach additional sheets, if necessary). | (Be specific) | si nere: | | |
|--|---------------------------------------|----------|--|------------|
| N/A | | | | |
| | | | The second secon | |
| | <u></u> | | | |
| | | | | |
| | , , , , , , , , , , , , , , , , , , , | | <u></u> | |
| Life or company and the compan | | | | |
| | | | | |
| | | | | |
| | v | | · · · · · · · · · · · · · · · · · · · | |
| | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | | | | |
| | | | | |
| | | | | <u> </u> |
| | | | <u></u> | |
| 4 | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | · · · · · · · · · · · · · · · · · · · | |
| | | | - <u></u> | |
| *************************************** | | | | |
| | | · | | - Allerton |

| The date of each amendment(s) adoption: 06/20/2013 | | | | | |
|--|--|--|--|--|--|
| ΕŒ | Effective date if applicable: 06/20/2013 | | | | |
| | | o more than 90 days after amendment file date) | | | |
| Àde | Adoption of Amendment(s) (C | CHECK ONE) | | | |
| | The amendment(s) was/were adopted by was/were sufficient for approval. | the members and the number of votes cast for the amendment(s) | | | |
| | adopted by the board of directors. | 2013 Lun, Lune | | | |
| | have not been selecte other court appointed (Typed d | ice chairman of the board president or other officer-if directors ad, by an incorporator — if in the hands of a receiver, trustee, or liduciary by that fiduciary) If printed name of person signing) If person signing) | | | |