P1200095466

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C. LEWIS
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EXAMINER

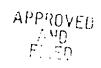
COVER LETTER

TO: Amendment Section Division of Corporations

> P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION: AEZ HOL	DING CORPO	DRATION		
DOCUMENT NUMBER: P120000954	166			
The enclosed Articles of Amendment and fee are sul	bmitted for filing.			
Please return all correspondence concerning this mat	ter to the following:			
Lisa K. Hermar	nn, Esq.			
	Name of Contact Person			
Law Offices of Lisa K. Hermann, P.A.				
40.4.0	Firm/ Company			
134 South Dixi		uite 110		
Hallandale Bea	ach, FL 33009	1		
- 	City/ State and Zip Cod	e		
LHermann@Herm	nannlaw.com			
	sed for future annual report	notification)		
For further information concerning this matter, pleas	se call:			
Lisa K. Hermann	at (305	356-8403		
Name of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee S43.75 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)		
Mailing Address		Address		
Amendment Section Division of Corporations	Amendment Section Division of Corporations			

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



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Articles of Amendment to Articles of Incorporation SECUTIONS OF STUDE

AEZ HOLDING CORPORATION	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P12000095466	
(Document Number of Corporation (if known)	
ursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following are statistics of Incorporation:	nendment(s) to
. If amending name, enter the new name of the corporation:	
	ie new
ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbr Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must con ord "chartered," "professional association," or the abbreviation "P.A."	
. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
· · · · · · · · · · · · · · · · · · ·	
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
. 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:	
Name of New Registered Agent Concorde Land Title Services, Inc.	
134 South Dixie Highway, Suite 110	
(Florida street address)	
New Registered Office Address: Hallandale Beach , Florida 33009	,
(City) (Zip Code)	
lew Registered Agent's Signature, if changing Registered Agent: 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 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VD	Sergio Carulli	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			<u> </u>
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ach additional sheets, if necessary).	(Be specific)
	7-2
·	
n amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
ovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
Completion of manage (411)	
(5 approacts, material (4/1)	
Was approach, mainte (MI)	
S Spproader, manuae (MA)	
Try manufactor, manufactor (m)	
(2) approach, manuae (MA)	
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(2) Typinanoi, mainte (m)	
g grp. and and and and	

APPROVED AMD FILED

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	SECONTARY OF STATE TALL FOR THE SA	
The date of each amendment(s) adoptio date this document was signed.	n: 17 age 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) at for approval.	
	hy the shareholders through voting groups. The following statement 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)	
The amendment(s) was/were adopted baction was not required.	by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted baction was not required.	by the incorporators without shareholder action and shareholder	
Dated		
Signature	~ Nell	
(Bỳ a director	, president or other officer – if directors or officers have not been in incorporator – if in the hands of a receiver, trustee, or other court	
	uciary by that fiduciary)	
	Artonio Naddeo	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	