P12000098876

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BIVESION OF CORPORATION

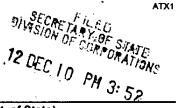
DEC 11 2012

T. ROBERTS

COVERLETTER

Division of Cor		×	
NAME OF CORPOR	ATION: INBEST CORP		
DOCUMENT NUMBER	ER: P12000098886		
The enclosed Article	es of Amendment and fee are su	ubmitted for filing.	
Please return all com	espondence concerning this matt	er to the following:	
<u>M</u>	ARITZA ALEGRIA	Name of Contact Person	
		Name of Contact Person	
<u>IN</u>	BEST CORP		
		Firm/ Company	
<u>10</u>	966 NW 8TH CT		
		Address	
co	DRAL SPRINGS, FL 33071		
		City/ State and Zip Code	
τć	OWERSON INVESTORS	ANI COM	
		be used for future annual report n	notification)
	•	•	**
For further information	n concerning this matter, please o	call:	
MARITZA ALEGRIA		at (954) 346-7821	
Nam	ne of Contact Person	Area Code & D	aytime Telephone Number
Enclosed is a check for	or the following amount made pay	yable to the Florida Department of	State:
\$35 Filing Fee	X \$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)
	iling Address	Street Ad	dress
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle	
Ia	nana3306, I L J2J 14	•	ee, FL 32301

Articles of Amendment to Articles of Incorporation of



INBEST CORP (Name of Corporation as currently filed with the Florida Dept. of State) P12000098886 (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: TOWERSON INVESTORS CO. The new 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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (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: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida (City) (Zip Code) 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

INBEST CORP

ATX1

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	PI	John Doe	
X Remove	¥	Mike Jones	
X Add	SV	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name.	<u>Address</u>
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change Add			
Remove			
4) Change Add			
Remove			
5) Change			
Add			
Remove			•
_			
6) Change Add			
Remove			

	INBEST CORP	ATX1
E.	if amending or adding additional Articles, enter change(s) here:	
	(attach additional sheets, if necessary). (Be specific)	
		
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F.	If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
	provisions for implementing the amendment if not contained in the amendment itself:	
	(if not applicable, indicate N/A)	
	·	
	•	

INBEST CORP	ATO	X1
The date of each amendment(s) adoption	: 12/6/2012	
Effective date <u>if applicabl</u> e:	12/6/2012 (no more than 90 days after amendment file date)	
	(no more than 90 days and amendment he date)	
Adoption of Amendment(s)	(CHECK ONE)	
X The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes cast for the amendment(s) nt for approval.	
	d by 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	ne amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
Dated	12/6/2012	
(Bhy a dire	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court	
	I fiduciary by that fiduciary)	
<u>MARI</u>	TZA ALEGRIA (Typed or printed name of person signing)	
VICE	PRESIDENT	
	(Title of person signing)	