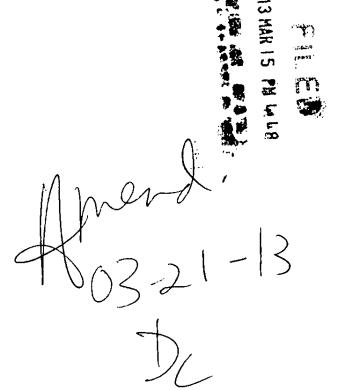
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03/15/13--01015

**35.08

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: VISION PUBLISHERS CORP DOCUMENT NUMBER: P12000102295 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **JORGE BARROS** Name of Contact Person VISION PUBLISHERS CORP Firm/ Company 8311 NW 64TH STREET, SUITE 1 Address MIAMI, FLORIDA 33166 City/ State and Zip Code negocios@larevistavision.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JOSE LLANOS Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee **□\$43.75** Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



VISION PUBLISHERS CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P12000102295

ment(s) to

(Docume	nt Number of Corporation	(if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	is Florida Profit Corporation a	dopts the following amendment	
A. If amending name, enter the new na	ame of the corporation:			
N/A			mi.	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corpor		
D. Enton novembrainel office address	if amplicable.	N/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: (Mailing address MAY BE A POST OFFICE BOX)		N/A		
(*************************************	<u> </u>			
				
D. If amending the registered agent an			me of the	
new registered agent and/or the new		<u>ss:</u>		
Name of New Registered Agent	N/A		-	
	(Florida s	street address)	-	
New Registered Office Address:	N/A	Florida		
nen negigieren office namesa.	(Cit	, Florida y)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			as of the position	
ab region		und decept the congunor	io of the position.	
	gnature of New Registered	Agant if changing	-	
N,	Knatare of New Registered	CAREIL, II CHUNRINR		

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.

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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	CLAUDIA MALAGON	8311 NW 64TH STREET
Add			SUITE 1
XX Remove			MAIMI, FLORIDA 33166
2) Change	VP	JOSE LLANOS	8311 NW 64TH STREET
XX Add		_	SUITE 1
Remove			MAIMI, FLORIDA 33166
3) Change			·
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)
/A	
· · · · · · · · · · · · · · · · · · ·	
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	.
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
I/A	

The date of each amendment(s) adoption: 03/08/2013
Effective date <u>if applicable</u> :	03/08/2013
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
Dated 03 /0	8/2013
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	JORGE BARROS
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)