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13 JUL 26 AM II: 23

C. LEWIS JUL 2 9 2013 EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: DOMINGA TROPICAL, INC DOCUMENT NUMBER: P1300000374					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
AVELINO VEGA					
•		Name of Contact Persor	1		
	CAI INTERNATIO	NAL INC			
		Firm/ Company			
	15935 NW 57TH AVE				
		Address			
	HIALEAH, FLORI	DA 33014			
•		City/ State and Zip Code	<u> </u>		
AVI	ELINO@CELLAC	CESS.US			
	E-mail address: (to be us	ed for future annual report	notification)		
For further information concerning this matter, please call:					
AVELINO VEGA		at (305	, 621-1300		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee	□\$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)		
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

FILED 13 JUL 26 AMII: 23

DOMINGA TROPICAL, INC

(Name of Corporation as currently filed with the Florida Dept. of State P13000000374

endment(s) to

(Document Number of Corporation (11 k	nown)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendme
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the
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	ss in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stree	t addrass)
(1 torius siree	i uuur essy
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 wi	th and accept the obligations of the position
Thereby accept the appointment as registered agent. I am familiar wi	and the open the oping the position
Signature of New Registered As	ent if chanoing

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)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	VP	CAI INTERNATIONAL INC	15935 NW 57TH AVE	
X Add			HIALEAH, FLORIDA 33014	
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
б) Change				
Add				
Remove				

	cles, enter change(s) here: (Be specific)
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
analisians for implementing the amor	aument if not contained in the amenument itsen.
provisions for implementing the amer (if not applicable, indicate N/A)	
provisions for implementing the amer	
provisions for implementing the amer (if not applicable, indicate N/A)	
provisions for implementing the amer (if not applicable, indicate N/A)	
provisions for implementing the amer (if not applicable, indicate N/A)	
provisions for implementing the amer (if not applicable, indicate N/A)	

	1111 1/ 00 0040	Ellen
The date of each amendment(s) ac	JULY 22, 2013	. If other than the
date this document was signed.	11 1/ 00 0040	13 1111 20 000
<u> </u>	(no more than 90 days after	amendment AELAHASSEE, FLORIDA
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of ficient for approval.	votes east for the amendment(s)
	proved by the shareholders through voting a each voting group entitled to vote separat	
"The number of votes cast	for the amendment(s) was/were sufficient	for approval
by	(voting group)	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareho	lder action and shareholder
Dated 07/22	2/2013	
Signature	lireator, president or other officer – if direc	
selecte	lirector, president or other officer — If direct d, by an incorporator — If in the hands of a ted fiduciary by that fiduciary)	
	JUAN U JIMENEZ	ROBAINA
	(Typed or printed name	of person signing)
	PRESIDENT	

(Title of person signing)