

(Re	questor's Name)	
(Ád	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		<u>.</u>
:		
	<del></del>	

Office Use Only



200250672972

08/16/13--01004--003 \*\*35.00

AUG 21 2013 R. WHITE



## **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: XF	PORTA INC 00002572	· · · · · · · · · · · · · · · · · · ·	
DOCUMENT NUMBER:	·		<del></del>
The enclosed Articles of Amendment	and fee are submitted for f	iling.	
Please return all correspondence cond	erning this matter to the fol	lowing:	
PABLO	CALATRAVA		
XPORTA		Contact Person	
1101 BR	Firm	Company	OWER STE 800
MIAMI F	·	Address	
	City/ Stat	e and Zip Code	
E-mail ad For further information concerning the	•	·	notification)
PABLO CALATRAVA		<sub>it (</sub> 305	<sub>_)</sub> 851-1236
Name of Contact Pers	on	Area Coo	le & Daytime Telephone Number
Enclosed is a check for the following	amount made payable to the	e Florida Depa	rtment of State:
	ate of Status Certifie	nal copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32	ations	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILE®

8 AUG 16 AN 10:37

XPORTA INC		ADDRESS AND DE REAL	
(Name of Corporation as currently	filed with the Florida Dept.		DA .
P13000002572		***	
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Flor ts Articles of Incorporation:	ida Statutes, this <i>Florida Prof</i>	it Corporation adopts the following a	mendment(s)
A. If amending name, enter the new name of the	corporation:		
		T	ie new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or to	rp," "Inc," or "Co". A pro		
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A.)			
		<del></del>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u></u>		
D. If amending the registered agent and/or regis	stered office address in Floric	da, enter the name of the	
new registered agent and/or the new register			
Name of New Registered Agent			
· · · · · · · · · · · · · · · · · · ·			
	(Florida street address)	<del></del>	
New Registered Office Address:		, Florida	
	(City)	(Zip Code)	
-			
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen		ant the obligations of the position	
i nereby accept the appointment as registered agen	i. Tam jamiliar wiin ana acci	epi ine 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change	VP	DIEGO FERNANDEZ	1101 BRICKELL AVE SOUTH TOWER STE 800
X			MIAMI FL 33131
Remove			<del></del>
2) Change	VP	RAUL PONTAC	1101 BRICKELL AVE SOUTH TOWER STE 800
$\frac{\mathbf{X}}{\mathbf{X}}$ Add			MIAMI FL 33131
Remove			
3) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
	man Mar
If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) a	dention: 08/13/2013	, if other than the
date this document was signed.	3/13/2013	, it outer than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
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 votes cast for the amendment(s) ifficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	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 shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated_08/1;	3/2013 Datmas:	
selecte	lirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary)	
	PABLO CALATRAVA	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	