## P13000004462

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: SUPER DC	LLAR DISCOU	NT CORP
DOCUMENT NUMBER: P130000426	2	
The enclosed Articles of Amendment and fee are sub-		
Please return all correspondence concerning this mat	ter to the following:	
MARIA ALEXANI	DRA LOPEZ	
	Name of Contact Person	1
SUPER DOLLAR	DISCOUNT CO	ORP
	Firm/ Company	
1001 SW 67 AVE		
	Address	
MIAMI, FL 33144		
	City/ State and Zip Cod	e
MARALEXLO	73@GMAIL.CC	DM
	ed for future annual report	
For further information concerning this matter, pleas	e call:	
MARIA A LOPEZ	at (786	269-6736
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made p	ayable to the Florida Depa	artment of State:
\$35 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation

SUPER DOLLAR DISCO	DUNT, CORP.			
(Name of Corporation as	currently filed with the Flor	ida Dept. of State)		
P13000004262				
(Documer	nt Number of Corporation (if k	nown)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Fle</i>	orida Prosit Corporation ado	pts the following ame	endment(s) to
A. If amending name, enter the new na	ame of the corporation:			
			The	new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered." "professional associa	ation "Corp," "Inc," or "Co	". A professional corporati		
B. Enter new principal office address,				
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)				
D. If amending the registered agent an		s in Florida, enter the name	e of the	8
new registered agent and/or the nev			ASS.	=
Name of New Registered Agent	MARIA A LOPEZ		2	# [ii
	15620 SW 80 ST	MIAMI,FL33193	70	The Control
	(Florida street	address)		ണ ഇ
New Registered Office Address:		, Florida		
	(City)		(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agent:			
I hereby accept the appointment as regist		h and accept the obligations	of the position.	
1	> Whan I			
Sig.	gnature of New Registered Age	ent, 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
1) Change	<u>P</u>	OTERO,KATERINE	1001 SW 67 AVE
Add			MIAMI, FL 33144
X Remove			
2) Change	VP	ECHAGARRUA,CHABELI	1001 SW 67 AVE
Add			MIAMI, FL 33144
X Remove			
3) Change	<u>P</u>	MARIA A LOPEZ	15620 SW 80 ST
X Add			MIAMI, FL 33144
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			A STATE OF THE STA

Attach	additional sheets, if necessary). (Be specific)
	U/A
	,
*	
nrovis	nendment provides for an exchange, reclassification, or cancellation of issued shares, ions for implementing the amendment if not contained in the amendment itself:
(i)	not applicable, indicate N/A)
	U/A
	$\mu/\lambda$
-	
<u>.</u>	

The date of each amendment(s) a	doption: 02/07/2013	
Effective date <u>if applicable</u> :	2/07/2013	
<u></u>	(no more than 90 days after ame	endment file date)
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad- by the shareholders was/were st	opted by the shareholders. The number of vote ufficient for approval.	s cast for the amendment(s)
	proved by the shareholders through voting grou reach voting group entitled to vote separately o	
"The number of votes cast	for the amendment(s) was/were sufficient for a	approval
by	(voting group)	
	(voting group)	
action was not required.	opted by the board of directors without shareho	
action was not required.	.,	
Dated 02/07/ Signature (By a co	7/1/-	or officers have not been
	ed, by an incorporator – if in the hands of a recented fiduciary by that fiduciary)	eiver, trustee, or other court
	MARIA ALEXANDRA LOP	EZ
	(Typed or printed name of person s	signing)
	PRESIDENT	
	(Title of nerson signing)	