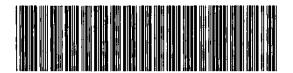
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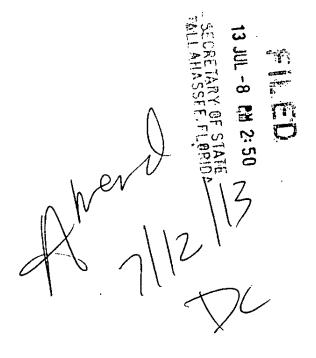
| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------------|
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| (Ci | ty/State/Zip/Phone | = #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bı | usiness Entity Nan | ne) |
| | | <u></u> |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: ANIMPORT FUL. P 13000005011 DOCUMENT NUMBER: ___ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RAFAEL BARRUSO

Name of Contact Person ANIM PORT INC.
Firm/Company 5589 N.W. 72 AVE. Mjami, FL 33166
City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RAFAEL BARROSO at (786) 5540715

Name of Contact Person Area Code & 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 & □\$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 P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment Articles of Incorporation

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

P 1300005011 (Document Number of Corporation (if known)

ent(s) to

| A If amounting manus and an the manuscript | | , | |
|---|---------------------------|--|--------------|
| A. If amending name, enter the new name | of the corporation: | N/p | _The i |
| name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association | on "Corp," "Inc," or "Co" | '. A professional corporation name must (| bbrevia |
| B. <u>Enter new principal office address, if a</u> (Principal office address <u>MUST BE A STRI</u> | | N/B | - |
| | - | The second secon | . |
| C. Enter new mailing address, if applicabe (Mailing address MAY BE A POST OF) | | MA | - |
| | _ | | • |
| | _ | | _ |
| | | in Florida, enter the name of the | |
| D. If amending the registered agent and/o new registered agent and/or the new re | | in Florida, enter the name of the | |
| | | | |
| new registered agent and/or the new re | egistered office address: | | |

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 | PT John | <u>Doe</u> | |
|-------------------------------|----------------------|------------------|------------------------------------|
| X Remove | <u>V</u> <u>Mike</u> | Jones | |
| X Add | SV Sally | <u>Smith</u> | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | _ <u>V</u> | Guillermo Salomo | N |
| Add | | | |
| Remove | | | |
| 2) X Change | D 5 T | RAFAEL BARROSO | 5589 N.W.72 AVE MIAMI FL. 33166 |
| Add | | | MIAMI FL. 33166 |
| Remove | | | ···· |
| 3)Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| Attach additional sheets, if necessary). | icles, enter change(s) here: (Be specific) |
|---|--|
| | N/A |
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| t an amendment provides for an exchange provisions for implementing the ame | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | • |
| | NA |
| | |
| | |
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| | |
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| The date of each amendment(s) adoption: 6-17-13 | | |
|---|--|--|
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| | | |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were adopted by the shareholders was/were sufficient | by the shareholders. The number of votes cast for the amendment(s) ent for approval. | |
| | ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s): | |
| | he amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (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. | l by the incorporators without shareholder action and shareholder | |
| Dated6- | 19-13 | |
| Signature | 19-13 luf Bun | |
| (By a direct selected by | or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court | |
| | iduciary by that fiduciary) | |
| | RAFAEL BARROSO (Typed or printed name of person signing) | |
| | (Typed or printed name of person signing) | |
| | D-5.T | |
| | (Title of person signing) | |