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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : BROWARD SCHO SERVICES INC.

Account Number: I2010000008C

Phone

: (954)366-3850

Fax Number

954 - 633 - 7850

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:	
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COR AMND/RESTATE/CORRECT OR O/D RESIGN DOMUS AMERICA INVESTMENT INC

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COVER LETTER

TO:	Amendment Section
	Division of Corporations

NAME OF CORPORATION: DOMUS AME	ERICA INVESTMENT INC
DOCUMENT NUMBER: P130000138	
The enclosed Articles of Amendment and fee are sub	mitted for filing.
Please return all correspondence concerning this matt	er to the following:
PIO F BARRIO	S
	Name of Contact Person
DOMUS AMER	ICA INVESTMENT INC
	Firm/ Company
1799 N STATE	RD 7 SUITE 10
	Address
MARGATE, FL	33063
	City/ State and Zip Code
TAXRIGHT7@YA	
E-mail address: (to be use	ed for future annual report notification)

For further information concerning this matter, please call:

PIO F BARI	RIOS	_{at 1} 954	, 960-5630
		de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

From: Amelia Basso

Fax: (954) 633-7850

To:

Fax: +1 (850) 617-6380

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SECRETARY OF 3 INTERMEDIATIONS

SIGNATIONS

Articles of Amendment to Articles of Incorporation of 14 AUG 21 AM 9: 25

DOMUS AMERICA INVESTMEN				
(Name of Corporation as currently filed with t	the Florida Dept. of S	late)		
P13000013885 (Document Number of Corporati	ian (if known)			
,				
ursuant to the provisions of section 607.1006, Florida Statutes, s Articles of Incorporation:	, this <i>Florida Profit Co</i>	<i>rporation</i> adop	ots the following	g amendment(s)
. If amending name, enter the new name of the corporation	<u>n:</u>			
V/A	·			The new
ame must be distinguishable and contain the word "corpo Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." ord "chartered," "professional association," or the abbrevial	or "Co". A profession	or "incorpora onal corporation	ued" or the al on name must o	breviation contain the
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A			
). If amending the registered agent and/or registered office new registered agent and/or the new registered office ad		nter the name	of the	
NI/A	BAL C.J.C.			
Name of New Registered Agent NIA				
/Fior	ida street address)			
New Registered Office Address:		, Florida	<u> </u>	_
	(City)		(Zip Code)	

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; CPO = 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>	<u>Name</u>		Address
1) Change	VP	TEJE	EDA-PEREIRA, ERNEST	MONTE ROSA 240 #904
Add				LIMA, PE 5112
Remove				
2) Change	****			-
Add				
Remove				
3) Change		<u> </u>		
Add				A 44 (44)
Remove				170-9-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
4) Change		-		
Add				
Remove				
5) Change		_		
Add				
Remove				**************************************
6) Change				
Add				
Remove				

To:

	(Re specific)			
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			· · · · · · · · · · · · · · · · · · ·	

	To the second se			
	hange, reclassifica	tion, or cancellati	on of issued shares	ia.
f an amendment provides for an exc	andmont if not con		noment itsen.	
f an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	endment if not con			
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f an amendment provides for an exe provisions for implementing the am (if not applicable, indicate N/A)	endment if not con			
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provisions for implementing the am (if not applicable, indicate N/A)	endment if not con			
provisions for implementing the am (if not applicable, indicate N/A)	endment if not con			

: :



14 AUG 21 AM 9: 25

date this document was signed	(s) adoption: 08/19/2014	The second second
Effective date if applicable:	08/19/2014	
<u> </u>	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
	te adopted by the shureholders. The number of votes east for the amendment(s) ere sufficient for approval.	
The amendment(x) was/we must be separately provid	re approved by the thurcholders through voting groups. The following statement ea for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s east for the amendment(s) was/were sufficient for approval	
by	(+oline group)	
The amendment(s) was/wasetion was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder	
Dated 08/	19/2014	
	High director, president or other officer if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other count appointed fiduciary by that fiduciary)	off) across
	PIO F BARRIOS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	