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SECRETARY OF STATE ALLAHASSFELFLORIO 2013 APR -5 PM 3× 0€

APR 11 7013

COVER LETTER

Division of Corporations
NAME OF CORPORATION: Divicion Operaciones Especiales Inc DOCUMENT NUMBER: P130000 20185
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person Divicion Operaciones Especiales From Firm/Company 226 Rontunda Dr Address Nissimmee FL 34758 City/ State and Zip Code Jo. garcias & Qol. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tose A. Garcia Ortiz at (407), 914-6951 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 Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Street Address Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation of

Divicion Operac	tiones Espec	ciales	INC		_
(Name of Corporation as c	urrently filed with the Flo	rida Dept. of S	State)		
	3000020189				_
(Document	Number of Corporation (if I	known)			
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this F	lorida Profit C	<i>orporation</i> ado	pts the followin	g amendment(s) to
A. If amending name, enter the new nam	ne of the corporation:				
name must be distinguishable and contai "Corp.," "Inc.," or Co.," or the designat word "chartered," "professional association	tion "Corp," "Inc," or "C	o". A professi	or "incorpordional corporati	ated" or the a	_The new bbreviation contain the
B. Enter new principal office address, if (Principal office address MUST BE A STR					-
C. <u>Enter new mailing address, if applica</u> (Mailing address <u>MAY BE A POST OI</u>					- - -
D. If amending the registered agent and/ new registered agent and/or the new i		ss in Florida, c	enter the name	of the	-
Name of New Registered Agent _					
_	(Florida stree	et address)			
New Registered Office Address:	(City)		, Florida	(Zip Code)	-
New Registered Agent's Signature, if cha I hereby accept the appointment as register		th and accept t	he obligations o	of the position.	

2013 APR -5 PM 3 0
SECRETARY OF STATE

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>Y</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	46	Trans Ortiz Lydis	226 Rontunda Dr
Add			Kissimmee FL 34758
Remove			
2) Change	P	Garcia Ortiz, Jose A	
Add			Wissimmee FL 34758
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
an amendment provides for an exchorovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis and analysis and an analysis analysis and an analysis and an analysis and an analysis and an an
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an angle in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an angel in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an angel in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:

The date of each amendment(s)	adoption: March 29, 2013
Effective date if applicable:	March 29, 2013 (no more than 90 days after amendment file date)
,	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes can	st for the amendment(s) was/were sufficient for approval
by	(voting group)
•	(voting group)
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder
Dated Mo	29, 2013 .
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Tose A. Garcia Ostiz (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)