P130000026561

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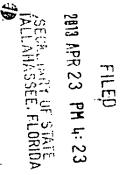
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COVER LETTER

TO: Amendment Section
Division of Corporations

	Casy Inves ER: P1300002656		
	f Amendment and fee are su		
Please return all corresp	ondence concerning this mat	ter to the following:	
,	Ariel Furman		
_		Name of Contact Person	1
1	Kapital Group LL	C	
_		Firm/ Company	<u></u>
	1882 Tyler Street		
_	<u>-</u>	Address	
	Hollywood, FL 33	020	
_		City/ State and Zip Cod	e
afur	man@kapitalgrou	inlle com	
		ed for future annual report	notification) .
For further information Ariel Furman	concerning this matter, pleas	e call: at (_305	、4503814
Name of	Contact Person	at (Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 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)
Amer Divis P.O.	ng Address idment Section ion of Corporations Box 6327 nassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assec, FL 32301

Articles of Amendment Articles of Incorporation of

FILED

Casy investment Corp.		- 2013 APR 23 PM 4: 23
(Name of Corporation as currently filed with	the Florida Dept. of State)	ZHIJ AFR ZO TIT 4° ZO
P13000026561		SCORLIARY OF STATE
(Document Number of Corporat	ion (if known)	TALLAHASSEE, FLORIDA
Pursuant to the provisions of section 607.1006. Florida Statutes. ts Articles of Incorporation:	this Florida Profit Corporat	
A. If amending name, enter the new name of the corporation	<u>n:</u>	
		The new
name must be distinguishable and contain the word "corpo" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbrevial	or "Co". A professional co	acorporated" or the abbreviation orporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
D. <u>If amending the registered agent and/or registered office</u> new registered agent and/or the new registered office ad		e name of the
Name of New Registered Agent		
(Flori	da street address)	
Non Designand Office Address	El	ami da
New Registered Office Address:	(City)	orida(Zip Code)
New Registered Agent's Signature, if changing Registered A	gent:	, , ,
l hereby accept the appointment as registered agent. I am fam	iliar with and accept the oblig	zations of the position.
Signature of New Regist	ered 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 <math>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>РТ</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) X Change	S	Ariel Furman	1882 Tyler Street
Add			Hollywood, FL 33020
Remove			
2) Change			
Add			
Remove			
3)Change		<u> </u>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ling or adding additional Asditional Asditional sheets, if necessary,	. (Be specific)	TO THE P		
	, , , , , , , , , , ,	1-1			

an am	endment provides for an ex	change, reclassific:	ation, or cancellati	on of issued shar	es,
provisio	ons for implementing the an	iendment if not co	ntained in the ame	ndment itself:	
(1)	not applicable, indicate N/A)				
	·				
			 -		

The date of each amendment(s)	adoption: 04/15/2013
Effective date if applicable: 0	4/15/2013
The state of the s	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were a 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 ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated 04/15	5/2013
selec	director, president of 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)
	Cristian Labra
	(Typed or printed name of person signing)
	President
	(Title of person signing)