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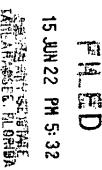
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COVER LETTER

TO: Amendment Section Division of Corporations BEST INVEST HOMES, CORP NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ELSA DIANA MAC PHERSON Name of Contact Person BEST INVEST HOMES, CORP Firm/ Company 935 Forest Hill Blvd Address West Palm Beach, Fl. 33405 City/ State and Zip Code elsadiana@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561) 2150575

Area Code & Daytime Telephone Number ELSA DIANA MAC PHERSON Name of Contact Person 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) Street Address **Mailing Address**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

REST	INVEST	HOMES	CORP

SEST INVEST HOMES, CORF	,	• • • • • • • • • • • • • • • • • • • •		77.48
(Name o	f Corporation as currentl	ly filed with the Flori	da Dept. of State)	201
BEST INVEST HOMES, CORP				3
	(Document Number of	f Corporation (if know	n)	7 0
ursuant to the provisions of section 607.3 s Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corpor	ration adopts the fo	ollowing amendment(s)
. If amending name, enter the new na	me of the corporation:			
SAME				The new
ame must be distinguishable and cont Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associat	ation "Corp," "Inc," or "	'Co". A professional		
B. Enter new principal office address, i	f applicable:	SAME		
Principal office address <u>MUST BE A ST</u>	TREET ADDRESS)			
			<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SAME	•• •	·
		7.		· .
•				
				<u> </u>
). If amending the registered agent an			the name of the	
new registered agent and/or the nev				
Name of New Registered Agent ELSA DIANA MAC PHERSO		ERSON		
	935 Forest Hill Blvd			
and the second second		reet address)		140
New Registered Office Address:		reet address) , y .	Florida 3	3405

address of each Officer: (Attach additional sheets, Please note the officer/din P = President; V = Vice in Executive Officer; CFO = held. President, Treasure. Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	and/or D if necess rector titi President Chief I r, Director in the fo ves the c	Nirector by Sary) The by the fit; T= Trea Financial or would by Ilowing many orporation	eing added: rst letter of the office title. ssurer; S= Secretary; D= Officer. If an officer/dire oe PTD. anner. Currently John Do n, Sally Smith is named th	Director; TR= Tr ctor holds more th oe is listed as the P	lirector being removed and title, name, and ustee; $C = Chairman$ or $Clerk$; $CEO = Chief$ and one title, list the first letter of each office ST and Mike Jones is listed as the V . There is hould be noted as John Doe, PT as a Change,	
Example: X Change	<u>PT</u>	John Doe				
X Remove	<u>v</u>	Mike Jo	Mike Jones			
_X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title		Name		<u>Addres</u> s	
1)Change	P		Andres Castillo		935 Forest Hill Blvd	
Add	_	_			West Palm Beach, Fl. 33405	
X Remove						
2) X Change	P		Elsa Diana Mac Pherson		935 Forest Hill Blvd	
Add		_			West Palm Beach, Fl. 33405	
Remove					<u> </u>	
3) Change	VP	_	Elmer Nolbert Castillo		935 Forest Hill Blvd	
X Add			•		West Palm Beach, Fl. 33405	
Remove						
4) Change				<u> </u>	<u> </u>	
Add	•	4		•		
Remove						
5)Change						
Add						
Remove			• •			
6) Change					. 1	
Add						

____ Remove

(Attach additional sheets, if no	1	
Mr. Andres Castillo is no longer	the equity partner for the company.	<u> </u>
		1
		
		-
		
		
·		
	✓	
F. <u>If an amendment provides f</u>	or an exchange, reclassification, or cancellation of issued share	<u>s.</u>
provisions for implementin (if not applicable, indica	the amendment if not contained in the amendment itself: $\frac{1}{2} (N/4)$	
His 500 shares, are transferred to		
		
The total 1,000 shares belong to	vis. Elsa Diana Mac Pherson	
		<u> </u>
	· ·	

December 31, 2014	
The date of each amendment(s) adoption:late this document was signed.	, if other than the
December 31,2014	
Effective date <u>if applicable</u> : (no more than 90 days after amendn	nent file date)
(······ y ··········
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes can by the shareholders was/were sufficient for approval.	st for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on the	The following statement he amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for appr	oval
by	31 ·
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action was not required.	on and shareholder
Dated December 30,2014	
Signature Viana Palaco	
(By a director, president or other officer - if directors or	
selected, by an incorporator – if in the hands of a receive appointed fiduciary by that fiduciary)	r, trustee, or other court
ELSA PLANA MAC	PHERSON
(Typed or printed name of person sign	ing)
Elsa Diana Mac Pherson — RES (DE	NT OWNER
(Title of person signing)	