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COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION:	DEVElopment, Inc			
DOCUMENT NUMBER: 13,0000 45005				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Miguel A Coacho				
Name of Contact Person Name of Contact Person Firm/ Company				
6500 SW 113 ave, Migni, Fl 33173				
Aliami El 28/72				
	City/ State and Zip Code			
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Miguel A Corection	at (305) 330 - 8190			
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 & Certificate of Status				
Mailing Address				
Amendment Section Amendment Section				
Division of Corporations P.O. Box 6327	Division of Corporations			
Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopt action was not required.	ted by the incorporators without shareholder action and shareholder	
Dated 12	24/2013	
Signature		
	ector, 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 court	٥
appointed	fiduciary by that fiduciary)	J
	Mayed A. Coacho (Typed or printed name of person signing)	_
	(Typed or printed name of person signing)	
_	OWNER	
	(Title of person signing)	