P13000046083

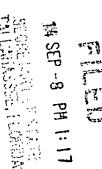
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SEP 1 5 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section

Division of Corporations					
NAME OF CORPORATION: MUNIO 7	Istbury Law P.A.				
DOCUMENT NUMBER: P1300004600	DOCUMENT NUMBER: P13000046083				
The enclosed Articles of Amendment and fee are subm	nitted for filing.				
Please return all correspondence concerning this matte	r to the following:				
Munio & Astlan	Name of Contact Person 24 Law P. A. Firm/ Company				
490 Biscayne 12	Address				
Miami, FL, 33132 City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please	call:				
Epica Asthury Name of Contact Person	at (937) 901-1277 Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee \$\text{Certificate of Status}\$	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address	Street Address				
Amendment Section Division of Corporations	Amendment Section Division of Corporations				
P.O. Box 6327	Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

Munio & Astlary Law P. A	# SEP -8 PM 1:17
(Name of Corporation as surrently filed with the FI	orida Dept. of State)
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation	The new
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	990 Biscaupe Blud Ste 501
(Trincipui office uduress <u>most be A Street ADDRESS</u>)	Miami, FL, 33132
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
<u></u>	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent Chica ASH	DURU)
990 BIS AUNC (Florida stre	Blud Se SOL
New Registered Office Address: Miami	, Florida 33132
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
	ant if changing
Signature of New Registeredy A	geni, ij 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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One) 1) Change Add Remove	Title V	Name Jorge Munico	Address 990 Biscayne Blud Ste SOI Miami, FL,33132
2) Change Add Remove 3) Change			
Add Remove 4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove	<u>-</u>	-	

amending or adding additional Art	ticles, enter change(s) here:
ttach additional sheets, if necessary).	
A (1/)	
N	
107	
	
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an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
rovisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate $\overline{N/A}$)	
1 / / /	
NA	
• •	
	-

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
by" (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 8/20/2014	
Signature Cico and Company	
(By a 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 court	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	