P13005306

(Re	equestor's Name)	, .		
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AUG 28 2013

R. WHITE



COVER LETTER

Division of Corporations					
NAME OF CORPORATION: THE CASO GROUP, JNC. DOCUMENT NUMBER: P13000053006					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Victor A. Careaga					
Name of Contact Person J CABO GROUP, INC.					
25015.W. 37th Ave. #403					
MIAMI, FL 33133					
City/ State and Zip Code Vactoracareaga (Dyahoo. Com E-mail address: (to be used for further annual report notification)					
For further information concerning this matter, please call:					
Victor Careaga at 305 439-8325 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 (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301					

Articles of Amendment

to

Articles of Incorporation (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

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> <u>Mike Jones</u>
X Add	SV Sally Smith
Type of Action (Check One)	Title Name Address
1) Change	President DARIO AVILA 102100 NW 10th St.
Add	miam, FC 33172
Remove	
2) Change Add	V. Pres. Victor Greage 25015.W. 37th Ave.
Remove	MAMI, FL 33133
3) Change	
Add	
4) Change	· · · · · · · · · · · · · · · · · · ·
Add	
Remove	
5) Change	
Add	
Remove	
6) Change	
Add	
Remove	

Attach <i>additio</i>	nal sheets, if necessary).	(Be specific)	1	
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			1100	
				•
		<u> </u>		
f an amendm	ent provides for an excha	nge reclassification	, or cancellation of issued share	oe .
provisions for	implementing the amen	dment if not contain	ed in the amendment itself:	
(if not app	olicable, indicate N/A)			
		nla		
		1110		
				•
			——————————————————————————————————————	
,				
	<u> </u>			

The date of each amendment(s) ad	option: 8/22 2013	, if other than the
date this document was signed.		
Effective date if applicable:	8/22/2013	
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	,"	
	(voting group)	
☐ The amendment(s) was/were adoptaction was not required.	oted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopt action was not required.	oted by the incorporators without shareholder action and shareholder	
Dated	8/22/2013	
Signature X	Sym P Yant	
(By a din	rector, president or other officer - if directors or officers have not been	
	, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointe	ed fiduciary by that fiduciary)	
_	Giovanna Bolivar	
	(Typed or printed name of person signing)	
	INCORPORATOR	
_	(Title of person signing)	



August 26, 2013

FLORIDA DEPARTMENT OF STATE

Division of Corporations

COVENANT ALLIANCE GROUP, INC. 375 PARK AVE STE 2607

NEW YORK, NY 10152

SUBJECT: COVENANT ALLIANCE GROUP, INC.

REF: P97000092145

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Page 4 is missing from the amendment document. Please resubmit with the missing page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II FAX Aud. #: H13000188602 Letter Number: 013A00020309

AUG 28 2013

K. WHITE

P.O BOX 6327 - Tallahassee, Florida 32314