P1300001968

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	
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Amena a 9/11/13

COVER LETTER

TO: Amendment Sect Division of Corp				
NAME OF CORPO	RATION: JOAN TR	OPICAL INC		
DOCUMENT NUM	BER: P130000679	968		
	of Amendment and fee are sul	_		
Please return all corre	spondence concerning this mat	ter to the following:		
	AIMEE BURGO			
A & B CONSULTING ENTERPRISES INC				
	1929 W 60TH	Firm/ Company		
	1929 W 001F1	Address		
	HIALEAH FL 3			
		City/ State and Zip Code	<u> </u>	
ab	@abconsultingt	fl.com		
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
AIMEE BU	RGOS	_ _{at} 305_	827-0028	
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	irtment of State:	
■ \$35 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)	
Mailing Address		Street Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle		
1 21	ianassee, FL 32314	2001 E	xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

JOAN TROPICAL INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P13000067968

ent(s) to

(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation adopts the following a	
A. If amending name, enter the new name of the corporation:		
NA	77/	
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co" or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbr "Co". A professional corporation name must con	
B. Enter new principal office address, if applicable:	2795 NW 17TH AVE	
Principal office address MUST BE A STREET ADDRESS)	MIAMI FL 33142	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2795 NW 17TH AVE	
(Maining dualess MAT BE ATOST OFFICE BUA)	MIAMI FL 33142	
	1VII/ (1VII 1 L 00 1 + L	
D. If amending the registered agent and/or registered office add	lress in Florida, enter the name of the	
new registered agent and/or the new registered office addres	<u>s:</u>	
Name of New Registered Agent N A		
(Cl.:1	reet address)	
(riorida si		
New Registered Office Address:	, Florida	

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
l) Change		N A	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			-
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional	lding additional Artic sheets, if necessary).	(Be specific)	sy nere.		
1/A					
<u> </u>					
				<u>. </u>	<u> </u>
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				,	
provisions for in	provides for an exch uplementing the amer cable, indicate N/A)	ange, reclassificat ndment if not cont	ion, or cancellatio	n of issued shares, dment itself:	
					
					
					· <u></u> -
					

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The date of each amendment(s) a	08/20/2013	, if other than
date this document was signed.	8/20/2013	
Effective date i <u>r applicable</u> .	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes east for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
•	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/were ad action was not required.	lopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adaction was not required.	lopted by the incorporators without shareholder action and shareholder	
Dated_08/2	0/2013	
select	director, president or other officer – if directors or officers have not been ed. by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	JOAN A. BARRIOS CRUZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
•	(Title of person signing)	

the