## P13000068012

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14 SEP -8 PM 3: 07

SEP 1 2 2014 C. CARROTHUS-

## **COVER LETTER**

**TO**: Amendment Section Division of Corporations

NAME OF CORPORATION: Income S	Success Inc			
DOCUMENT NUMBER: P13000068012				
The enclosed Articles of Amendment and fee are s	ubmitted for filing.			
Please return all correspondence concerning this m	atter to the following:			
Christian S. Diaz				
Alianza Law F	Name of Contact Person	1		
2100 Coral W	Firm/ Company ay, Suite 404			
Miami, FL 331	Address 45			
<del></del>	City/ State and Zip Code	2		
Christiand E-mail address: (to be	iaz Qalianz used for future annual report	notification)		
For further information concerning this matter, plea	ase call:			
Christian S. Diaz	at (305	381-5116		
Name of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:		
\$35 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 Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle				

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

14 SEP -8 PM 3:07

## Income Success Inc

(Name of Corporation as currently filed with the Florida Dept. of State) P13000068012

dment(s) to

(Document Number of Corpora	tion (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation	Dn:
	The new oration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the ation "P.A."  8450 SW 167th Terrace  Palmetto Bay, FL 33157
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 new registered agent and/or the new registered office as	
Name of New Registered Agent	
(Flor	rida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered .  I hereby accept the appointment as registered agent. I am fan	
Signature of New Regis	tered 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 <math>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.

X Change	PT 1	John Doe				
X Remove	<u>Y</u> 1	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	Name	Address			
1) Change	<u>T</u>	Carlos R. Rey	8450 SW 167 AVE			
Add			Palmetto Bay, FL 33157			
Remove						
2) Change	VP	Maria Del Carmen Olivares	8450 SW 167 AVE			
Add			Palmetto Bay, FL 33157			
Remove						
3) Change	S	Maria Del Carmen Olivares	8450 SW 167 AVE			
Add			Palmetto Bay, FL 33157			
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

Attach additional sheets, if necessary). (Be specific)  If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (If not applicable, indicate N/A)	If amending or adding addition	al Articles, er	ter change(s	<u>) here</u> :			
provisions for implementing the amendment if not contained in the amendment itself:	(Attach adamonat sheets, if neces	sury). (De s	рестист				
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(if not applicable, indicate N/A)	If an amendment provides for a	n exchange, i	reclassificati	on, or cancel	lation of issue	ed shares,	
	(if not applicable, indicate i	<u>te amenamen</u> V/A)	t if not conti	ined in the a	menament ju	<u>seij;</u>	
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The date of each amendment(s) adoption: 08/15/2014	, if other than the
date this document was signed.	
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"	
(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 08/15/2014	
Signature  (By a director, president or other officer of directors or officers here not been	_
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Carlos R. Rey	_
(Typed or printed name of person signing)	
President	
(Title of person signing)	_