P13000014307

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R. WHITE

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COVER LETTER

TO: Amendment Section • Division of Corporations

NAME OF CORPOR	RATION: CONTAROLA IN	VESTMENTS, INC	_
DOCUMENT NUMI	BER: P13000074207		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this mat	tter to the following:	
	CARLOS BERNADINO BO	RGES FILHO	
		Name of Contact Person	1
		Firm/ Company	
	33 SE 7TH STREET, SUITE	E	
		Address	
	BOCA RATON, FL 33432		
		City/ State and Zip Code	2
CAR	LINHOSBORGES@ME.COM	Л	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
CARLOS BERNADI	NO BORGES FILHO	at (⁵⁶¹	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 sahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301



to

to
Articles of Incorporation 16 SEP = 5 PM 3: 34
of 16 St P = 5
Catana Ination to some the
(Name of Corporation as currently filed with the Florida Depti of State)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(sits Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
11/0
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)
(Maining dualess MAT BE AT OST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered office address:
new registered agent and/or the new registered/oritice address:
Name of New Registered Agent Agent
(Florida street address)
New Registered Office Address; NA
(City) (Zip Code)
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	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jone	<u>28</u>	
X Add	<u>sv</u>	Sally Smit	<u>th</u>	
Type of Action (Check One)	Title	<u>ī</u>	<u>Name</u>	Address
1) X Change	D	_ (CARLOS B BORGES FILHOS	1925 BRICKELL AVE, STE D205
Add				MIAMI, FL 33129
Remove				
2) Change	P		CARLOS B BORGES FILHO	1925 BRICKELL AVE. STE. D205
X Add				MIAMI, FL 33129
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change	<u> </u>			
Add				
Remove				
O Chi -				
6) Change				
Add				
Remove				

mending or adding additional A ach additional sheets, if necessary	y). (Be specific)
NIA	
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	/
	
	
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/	<u> </u>
7	
	
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n amendment provides for an ex	schange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	mendment if not contained in the amendment itself:
NA	•
[0] / -	
	
	

• • •	08/25/2016	
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
	5/2016	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	indiad tipped physiology open special constitution (1990) (MT
Note: If the date inserted in this bl document's effective date on the Dep	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) Ticient for approval.	ł
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	if
"The number of votes east t	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
08/25/2016		
Signature (Bund	irector, president or other officer – if directors or officers have not been	de describent in constitution of the Section
selected	d, by an incorporator – if in the hands of a receiver, trustee, or other court led fiduciary by that fiduciary)	
	CARLOS B BORGES FILHO	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	