P13000091742

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Amend Mamech 8 (1a) 11.13

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	D40000047		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this made	tter to the following:	
	LUI	S CAMPOY-SIE	RRA
_		Name of Contact Persor	1
		LA FIERA, INC.	
-		Firm/ Company	.
	100	00 FLEWELLING	G AVE
_		Address	
	00	OEE, FL 34761	
-		City/ State and Zip Code	
	mexco4@	ed for future annual report	notification)
	E-mail address. (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
LUIS CAMPO	Y-SIERRA	_{at (} 407	
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	□\$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)
Amer Divis P.O. I	ng Address Idment Section Idment Sec	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of



LA FIERA INC

LATILIA II	ν Ο
(Name of Corporation as currently filed with the Fl	
P13000091742	
(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:	
L A CONSTRUCTION USA, IN	IC The new
name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	1000 FLEWELLING AVE
(Principal office address MUST BE A STREET ADDRESS)	OCOEE, FL 34761
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1000 FLEWELLING AVE
(maining dual tos <u>mail burillosi of lited boll</u>)	OCOEE, FL 34761
D. If amending the registered agent and/or registered office address:	•
Name of New Registered Agent LUIS CAMPOY-	SIERRA
1000 FLEWELL	ING AVE
(Florida stre	·
New Registered Office Address: OCOEE	, Florida 34761 (Zip Code)
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w Signature of New Registered A	

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)	<u>Title</u>	Name	Address
1) Change	P	DIANA M HARO	PO BOX 820
Add			OCOEE, FL 34761
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			<u></u>

(Attach additional sheets, if necessary). (Be specific) If an amendment provides for an exchange, reclassification, or cancellation of issurprovisions for implementing the amendment if not contained in the amendment it (if not applicable, indicate N/A)	
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(ij noi applicable, inalcale N/A)	<u>elf:</u>
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The date of each amendment(s) adoption: 12/02/2013	, if other than the
date this document was signed.	, oo
Effective date if applicable: 12/02/2013	
(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)	
(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.	
Dated12/02/2013	
Signature (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)	
INCORPORATOR	
(Title of person signing)	