## P130000092511

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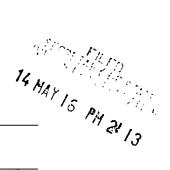
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: HAR SUPPLIERS CORPORATION				
DOCUMENT NUMBER: P13000092571				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Name of Contact Person				
Firm/ Company				
Haria Landa Firm/Company 6080 SW 40 Street Suite 4  Address  Miani FL 33155  City/State and Zip Code				
Address				
Mieni FL 33155				
M POSAda & Ipm - Iaw. com  E-mail address: (to be used for future annual report notification)				
L-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Maria Landa at (305)  Name of Contact Person Area Code & Daytime Telephone Number				
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 Circle Tallahassee, FL 32301				

## Articles of Amendment to Articles of Incorporation of



HAR SUPPLIERS CORPORATION		
(Name of Corporation as currently filed with the	Florida Dept. of State)	
P13000092571		
(Document Number of Corporation	(if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new name of the corporation:		
	The new	
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	6080 SW 40 Street, Suite 4	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Miami, Fl. 33155	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6080 SW 40 Street, Suite 4	
	Miami, Fl. 33155	
D. If amending the registered agent and/or registered office add	dress in Florida, enter the name of the	
new registered agent and/or the new registered office address		
Name of New Registered Agent		
,	treet address)	
New Registered Office Address: 6080 SW 40 Str	eet, #4, Miami <sub>, Florida</sub> 33155	
(Cin		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar		

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 Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	P/S	ZUNIGA, HORACIO	6080 SW 40 Street, Suite 4	
Add			Miami, Fl. 33155	
Remove				
2) Change	VP	NOY, RICHARD	6080 SW 40 Street, Suite 4	
Add			Miami, Fl. 33155	
Remove				
3) Change	<u>T</u>	JIMENEZ, NALINI	6080 SW 40 Street, Suite 4	
Add			Miami, FI. 33155	
Remove				
4) Change		<u> </u>		
Add				
Remove				
5) Change			_	
Add				
Remove				
6) Change				
Add				
Remove				

attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
<del></del>	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis

The date of each amendment(s) add date this document was signed.	option: March 1, 2014	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
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 east for	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(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 adoptaction was not required.	oted by the incorporators without shareholder action and shareholder	
Dated	95/12/2014 Hxxxxx	
Signature	17070000	. <del>_</del>
selected	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 ed fiduciary by that fiduciary)	
_	MALINI JIMENEZ (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	Tara	
•	(Title of person signing)	war-strain