## P13000095907

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SECRETARY OF STATE

JUL 1 4 2014

C. CARROTHERS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: C. I. MASMINERI	METAL CORP	
DOCUMENT NUMBER: P13000095907		
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
MARIO A SALAZAR RES	TREPO	•
	Name of Contact Person	1
C. I. MASMINERMETAL C	CORP	
	Firm/ Company	
15461 SW 9 TERRACE		
·	Address	
MIAMI, FL 33194		
	City/ State and Zip Code	2
MASMINERMETAL@GMAIL.CO	ОМ	
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, pleas	se call:	
MARIO A SALAZAR RESTREPO	at ( 305	454-1999
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	ortment of State:
\$35 Filing Fee \$\square\$\$\$ \$23.75 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

N/A

(Name of Corporati	on as currently filed wi	th the Florida Dept. of State)	
(Docum	nent Number of Corporat	tion (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this <i>Florida P</i>	Profit Corporation adopts the follow	ving amendment(s) to
A. If amending name, enter the new name of the co	orporation:		Those now
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered." "professional association," or the	" "Inc." or "Co". A j		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD			52
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>		
D. If amending the registered agent and/or register new registered agent and/or the new registered		orida, enter the name of the	
Name of New Registered Agent			
	(Florida street addres:	r)	
New Registered Office Address:	(City)	, Florida	(ip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		accept the obligations of the positio	<b>n</b> .
Sion	nature of New Registered	Agent if changing	<del></del>

If amending the Officer's 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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	<u>S</u>	_	Michael J. Krantz	21301 Powerline Road
x Add				Suite 100
Remove				Boca Raton, FL 33433
2) Change		_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				- Alexandra variation
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

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If an amendment provides for an e	xchange, reclassifi	cation, or cancellati	on of issued shares,	
· · · · · · · · · · · · · · · · · · ·	mendment if not co	<u>ontained in the ame</u>	<u>ndment itself:</u>	
provisions for implementing the a (if not applicable, indicate N/A)	)			
provisions for implementing the a	)		<del></del>	
provisions for implementing the a	)			
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	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> : <u> </u>		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
7	(voting group)	
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
7/9/20	ts .	
Dated/		
Signature		
(B) ;	a director, president or other officer - if directors or officers have not been cted, by an incorporator - if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	
$\ell$	MARIO A SALAZAR RESTREPO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	