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(1.M. 8-22-14

COVER LETTER

TO: Amendment Section

Division of Corp	orations		102		
NAME OF CORPO	RATION: PEDRO AL	JTO SALE COR	P		
DOCUMENT NUM	BER: P1400002574	1			
	of Amendment and fee are su		RIDA		
Please return all corre	spondence concerning this mat	tter to the following:			
	Pedro Alvarez				
		Name of Contact Persor	1		
		Firm/ Company			
	5990 W FLAGLER STREET # 9				
		Address			
	MIAMI, FL 33144				
		City/ State and Zip Code	e		
peo	droyasser1983@h	otmail.com			
<u>, </u>		sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
Pedro Alvare	ez	at (786	, 342-3683		
Name	of Contact Person		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)		
	iling Address		Address		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation (Name of Corporation as currently filed with the Florida Dept Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida 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

Mike Jones, v as kemi	ove, ana sany	Smun, Sv as an Aaa.	7
Example: X Change	<u>PT</u> <u>J</u>	John Doe	14 AUG 15 SEGRETAR TALLAHASS
X Remove	<u>V</u> <u>N</u>	Mike Jones	HASS OF F
X Add	<u>sv</u> <u>s</u>	Sally Smith	The state of the s
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address CONTRACTOR S
1) Change	<u></u>	Alexander Navarro	7721 NW 7 St #617
Add	-, -		Miami, FL 33126
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
_ Remove			
4) Change			
Add			
Remove			
5) Change			and the state of t
Add			A
Remove			
6) Change			····
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)	TACE T
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	D)
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If an arrandonal arranidar for an archange mades: Gastion or consultation of it	aved shares
If an amendment provides for an exchange, reclassification, or cancellation of is provisions for implementing the amendment if not contained in the amendmen	sued snares, t itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: 08/11/2014	_, 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.	14 AUG 77
The amendment(s) was/were approved by the shareholders through voting groups. The following statements must be separately provided for each voting group entitled to vote separately on the amendment(s):	G S
"The number of votes cast for the amendment(s) was/were sufficient for approval by	AM DO S
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.	
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) Presidum	
(Title of person signing)	