P14000028583

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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: THS PROPERTY INVESTMENTS CORP DOCUMENT NUMBER: P14000028583	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
NIRVANDO BATISTA	
Name of Contact Person	_
TAX CONTROLLER INC	
Firm/ Company	-
750 E SAMPLE RD BLDG 3 BAY 2	
Address	-
POMPANO BEACH - FL 33064	
City/ State and Zip Code	
JR@TAXCONTROLLER.COM	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

NIRVANDO	BATISTA	_{at (} 954	, 301-1848		
Name of Contact Person		Area Co	Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Dep	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)		

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Street Address

Articles of Amendment to Articles of Incorporation



THS PROPERTY INVESTMENTS CORP

(Name of Corporation as currently filed with the P1400028583	· · · · · · · · · · · · · · · · · · ·	
(Document Number of Corporation	(if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporat "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:	3015 N OCEAN BLVD #7L	
(Principal office address MUST BE A STREET ADDRESS)	FORT LAUDERDALE	
	FL 33308	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3015 N OCEAN BLVD #7L	
(National State of the State of	FORT LAUDERDALE	
	FL 33308	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		
Name of New Registered Agent		
(Florida	street address)	
New Registered Office Address:	ty) (Zip Code)	
(Ci	ιγ) (Στρ Code)	
New Registered Agent's Signature, if changing Registered Age	m.A.	

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	CARLOS E B CAMPOS	3015 N OCEAN BLVD #7L
Add			FORT LAUDERDALE
Remove			FL 33308
2) Change	Р	TALES H SPESSOTTO	3015 N OCEAN BLVD #7L
Add			FORT LAUDERDALE
Remove			FL 33308
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Art ttach additional sheets, if necessary).	(Be specific)		
	.		
			
an amendment provides for an excl	nange, reclassification	, or cancellation of	issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contain	ed in the amendm	ent itself:
(y not appacable, mateure (VA)			
·			

The date of each amendment(s) adoption: 08/07/2014	, 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.	
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)	
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.	
Dated 08/07/2014	
Signature	
(By a director, president or other officer I 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)	
TALES HENRIQUE SPESSOTTO	
(Typed or printed name of person signing)	-
PRESIDENT	
(Title of person signing)	