P14000034702

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: HOME61 N		
DOCUMENT NUMI	_{BER:} P1400003470	2	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	MANUEL J. VAD	ILLO, ESQ.	
		Name of Contact Person	n
	TORRES & VAD	ILLO LLP	
		Firm/ Company	
	11402 NW 41ST		E 202
	1414141 EL 00470	Address	
	MIAMI, FL 33178		
		City/ State and Zip Cod	e
MJ	VADILLO@TORF	RESVADILLOLL	P.COM
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
MANUEL J. V	VADILLO	at (305	, 485-9700
Name (of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r 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)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations I Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

P14000034702	المعيرة سندا
I HOUUUH UZ	
(Document Number of Corporation (if known)	
resuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> ad Articles of Incorporation:	opts the following amendm
If amending name, enter the new name of the corporation:	
me must be distinguishable and contain the word "corporation," "company," or "incorporation," "fnc.," or Co.," or the designation "Corp,," "Inc," or "Co". A professional corporation "chartered," "professional association," or the abbreviation "P.A."	
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered office address in Florida, enter the nam new registered agent and/or the new registered office address:	e of the
Name of New Registered Agent	
·	
(Florida street address)	

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 De	<u>D¢</u>	
X Remove	Y	Mike Jo	ones .	
X Add	<u>sv</u>	Sally S	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	CEO)	OLIVIER GRINDA	175 SW 7TH ST
Add				SUITE 2415
Remove				MIAMI, FL 33130
2) Change	coo)	OLIVIER BRION	175 SW 7TH ST
Add				SUITE 2415
Remove				MIAMI, FL 33130
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		_		
Remove				
Kelliove				

· · · · · · · · · · · · · · · · · · ·	icles, enter change(s) here: (Be specific)
/A	•

If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) adoption: MARCH 191H, 2015		, if other than th
date this document was signed	MADOLI 40TU 2045	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more many e days agree amonament gree amo)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	es cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wa action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dated_3/1	9/15	
Signature _	Re-	
(By a director, the control of the officer – if directors or officers have not been selected, by a scorporator – if in the hands of a receiver, trustee, or other court	
	appointed fiduciary by that fiduciary)	
	OLIVIER BRION	
	(Typed or printed name of person signing)	
	CHIEF OPERATING OFFICER	
	(Title of person signing)	