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COR AMND/RESTATE/CORRECT OR O/D RESIGN INVERSIONES ALEJANDRO FINOL CA INC

Certificate of Status	0
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Page Count	05
Estimated Charge	\$35.00

10 10/13/14

Tallahassee, I-L 32314

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: INVERSIONES ALEJANDRO FINOL CA INC DOCUMENT NUMBER: P14000041101 The enclosed Articles of Amendment and fee are submitted for filling, Please return all correspondence concerning this matter to the following: SUSANA BIJANI Name of Contact Person JP GLOBAL BUSINESS SOLUTIONS INC Firm/ Company 7325 NW 36TH ST Address MIAMI, FL 33166 City/ State and Zip Code DORAL@JPGBUSINESS.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: SUSANA BIJANI Name of Contact Person Enclosed is a check for the following amount made physible to the Florida Department of State: □\$43.75 Filing Fee & ■ \$35 Filing Fee □\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clillon Building

2661 Executive Center Circle

Tallahassee, Fl. 32301

OCT-10-2014 11:57

From:3054360094

(H140002382943)

Articles of Amendment to Articles of Incorporation of

INVERSIONES ALEJANDRO FII	NOL CA INC		
(Name of Corporation as currently file	ed with the Florida Dept	. of State)	-
P14000041101			
(Document Number of C	Corporation (if known)		_
Pursuant to the provisions of section 607.1006, Florida its Articles of incorporation:	Statutes, this Florida Pro	fit Corporation adopts the followin	g amendment(s) to
A. If amending name, enter the new name of the cor	<u>Troration:</u>		
			The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp., word "chartered." "professional association," or the a B. Enter new principal office address, if applicable:	" "Inc," or "Co". A pro- obbreviation "P A"		
(Principal office address MUST BE A STREET ADDI	RESS)		
	-		-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	00		.
			49
D. If amending the registered agent and/or registered new registered agent and/or the new registered o		da, enter the name of the	CT 10
Name of New Registored Agent			3 300
	(Florido street address)		
New Registered Office Address:		, Florida	-
	(C'iry)	(Zip Code)	
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I	am funtiliar with and acc		
Mgnature oj Nen	Negistered Agent, if char	ngung	

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= Secretury; 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 PID.

Changes should be noted in the following manner. Currently John Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>15.1.</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>s</u> v	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	MARBER ARELLANO	11431 NW LAKESIDE DR
Vqq			UNIT 1202
Remove			MIAMI, FL 33178
2) Change	·		
Add			
Remove			
3) Change			
Removo			
4) Thange			
Add			
Remove			
5) Change	** • • • • • • • • • • • • • • • • • •		
Add			
Remove			
6) Change			
Add			, , as the same of
Remove		*	
_			

f amending or adding additional Arti- Attach additional sheets, if necessary).	(Be specific)	77 1151 3 -		
	·····	·····		
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	<u></u>			
				<u>.</u>
	, <u></u>			
				·
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	unge, reclassificat indment if not con	ion, or cancellation	on of issued shar adment itself:	128.
			<u></u>	
				-·· - <u></u> -
				

The date of each amendment(s) adoption: 10/09/2014	, if other than the
date this document was signed.	
Effective date if applicable: 10/092014	
(no more than 90 days after amendment file date)	
Adaption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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 east for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(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 10/092014	
Signature Al etadotre	
(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)	
appointed ranking by that indicinity	
ALEJANDRO FINOL	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

(HA0002382943))