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(Re	questor's Name)
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JAN 14 2015

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: RASPADOS J & DOCUMENT NUMBER: P 14 0000 42 994 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Maribel Escalona Ramirez
Name of Contact Person 1274 W Flagler St. Miami, FL, 33135-2420 City/ State and Zip Code For further information concerning this matter, please call: at (786) 361-1109 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

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

Street Address

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

FILED

Articles of Amendment to Articles of Incorporation of

15 JAN 13 ANTH: 13

MECHETAST OT STATES THALLAHASSEE, HLONIDA

<u> </u>
(Name of Corporation as currently filed with the Florida Dept. of State)
P14 0000 42 994
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
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 TEJEDA GON ZALEZ, AYARILIS
1274 W Flagler St. Miumi, 33135 (Florida street address)
New Registered Office Address:, Florida
(City) (Zip Code)
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.

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	<u>P</u>	Maribel Escalona Romirez	1274 W Flagler St.
Add		•	Miami, FL 33135
Remove			
2) Change	P	TEJEDA GONZALEZ, AYAR	ILTS 1274 W Flagler St
Add			Miami, FL 33135
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

anach additional	theets, if necessary). (Be sp	ecific)		
				•

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f an amendment	provides for an exchange, re	eclassification, or can	cellation of issued sha	res,
provisions for in	plementing the amendment	if not contained in th	e amendment itself:	
(if not applic	able, indicate N/A)			
	<u>.</u>			
			1-10	
	·			

date this document was signed.	, it other than the
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)	
(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 January 9, 2015 Signature We note of the second seco	
(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)	ı
MARTREL ESCALONA PAMTREZ	
MARIBEL ESCALONA RAMIREZ (Typed or printed name of person signing)	
DRECINEALT	
PRESIDENT (Title of person signing)	
(Title of person signing)	