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R. WHITE DEC 15 2017 FILED 17 DEC 13 PH 3: 39

COVER LETTER

TO: Amendment Section Division of Corporations 15 HR Group 15, Inc.
P140000 54114 NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person

ZUMPANO (astro, LLC

Firm/ Company

500 5. DIXIE High Way #302

Address

Coral Gables, F1 33144

City/ State and Zip Code GIS elle. Ortiz delamo @ Zumpanocastro. com JE-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 503-2995
Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: □S43.75 Filing Fee & □\$52.50 Filing Fee □ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section

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

Articles of Amendment to Articles of Incorporation of

FILED

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Regi	S HR GYOUD IS GETTAGE OF STATE
(Name of Corporation as current	S HR GVOUP IS FING BY STATE STATES AND STATE
7140	00654116.
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	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 "corporati" "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: (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 ad- new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia.	nt:
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	PT Joh	an Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Sec	Carlos Saladrigus Jr	
Add			
Remove			
2) Change	Sec	Lily Gutierrez	10025 N. Kendall Dr.
# Add			Miami, \$1 33176
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Adđ			
Remove			

	cles, enter change(s) here (Be specific)		
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f an amendment provides for an exch	ange, reclassification, or	cancellation of issued sh	iares.
provisions for implementing the ame	idment if not contained	in the amendment itself:	<u></u>
(if not applicable, indicate N/A)			
•			
	_		

The date of each amendment(s) ad date this document was signed.	option:	, if other than th
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file da	nte)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the a ficient for approval.	mendment(s)
	roved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendn	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	pted by the board of directors without shareholder action and pted by the incorporators without shareholder action and sha	
Dated Signature	rector, president or other officer – if directors or officers have a not of in the hands of a receiver, trustee, or officers by that fiduciary)	ve not been or other court
	(Typed or printed name of person signing)	<u></u>
	Director	
	(Title of person signing)	