Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000190102 3)))



To:			
	Division of Co	orporations	
	Fax Number	: (850)617-6380	
From:			
		: LAZARUS CORPORATE F	TLING SERVICE, INC.
	Account Number	r : 12000000019	
	Phone	: (305)552-5973	_
	Fax Number	: (305) 675-5944	
Enter the	email address f	for this business entity	y to be used for fu
		s. Enter only one email	
Email :	Address:		<u> </u>
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Articles of Amendment

EDWIN IRON FENCE AND METALIC CORP. STATE OF STAT (Name of Corporation as currently filed with the Florida Dept. of State) P14000065331 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	"Corp," "Inc," or "Co". A proj	The any," or "incorporated" or the abbrevia fessional corporation name must contain
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE		
<u> </u>		
	·	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		
	(CE_BUA)	
(Mutting address MAT BE A FOST OFF)		
D. If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Floric	la, enter the name of the
). If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Floric	
). If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Floric intered office address: 25 NW 31 STREE (Florida street address)	T
). If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Floric intered office address: 25 NW 31 STREE	

H14000190102

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Iones	
X Add	<u>\$v</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
i) Change			
Add			
Remove			
2) Change	-u		
∧dd			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add		•	
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach addition	r adding additional Articles, nal sheets, if necessary). (Be	e specific)		~ dd ~ ^ C
	principal,	<u> </u>	officer/director	adatess
10: 25	NW 31 STREET, MIAI	MI FLORIDA 33127		
·			<u> </u>	
				
		<u>·</u>		
F. If an amendu	ent provides for an exchange	e, reclassification, or canc	ellation of issued shares.	
provisions fo	or implementing the amendm oplicable, indicate N/A)	ent if not contained in the	amendment itself:	
(y ····· ap	,,			
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	<u></u>			
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The date of each amendment(s) adoption: 8-12-14	, if other than th
date this document was signed.	, it odies than th
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 08/09/2014	
Signature Willford Region	
(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)	
LIGIA FORERO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	· ·