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Office Use Only



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C. CARCOTHET

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: DOUBLE SPARKING CORP | | | | | | |
|---|--|--|--|--|--|--|
| DOCUMENT NUMBER: P14000068002 | | | | | | |
| The enclosed Articles | The enclosed Articles of Amendment and fee are submitted for filing. | | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | | |
| | MAGALY GONZA | ALEZ | | | | |
| | MARIA ACCOUNT | Name of Contact Person | | | | |
| | M&M ACCOUNT | | INC | | | |
| | 5270 DALMAYE | Firm/ Company | | | | |
| | 5370 PALM AVE | | _ | | | |
| | LUAL EALLEL OOO | Address | | | | |
| | HIALEAH FL 330 | | | | | |
| | | City/ State and Zip Code | 2 | | | |
| go | nzalez1948@yaho | o.com | | | | |
| , | | ed for future annual report | notification) | | | |
| For further information concerning this matter, please call: | | | | | | |
| MAGALY GO | ONZALEZ | at (305 | , 557 1662 | | | |
| Name | of Contact Person | | de & Daytime Telephone Number | | | |
| Enclosed is a check for the following amount made payable to the Florida Department 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) | | | |
| | iling Address | Street Address | | | | |
| Amendment Section | | Amendment Section | | | | |
| Division of Corporations P.O. Box 6327 | | Division of Corporations Clifton Building | | | | |
| Tallahassee, FL 32314 | | 2661 Executive Center Circle | | | | |
| | | Tallahassee, FL 32301 | | | | |

Articles of Amendment to Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept. of State) DOUBLE SPARKING CORP (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: A. If amending name, enter the new name of the corporation: DOUBLE SPARKLING CORP 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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: SAME (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: N/A Name of New Registered Agent (Florida street address) N/A New Registered Office Address: Florida (City) 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 | Y | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| 1) Change | | N/A | |
| Add Remove | | | |
| 2) Change | ·, | N/A | |
| Add Remove | | | |
| 3) Change | | N/A | |
| Add | | | |
| Remove | | | |
| 4) Change | | N/A | |
| Add Remove | | | |
| 5) Change | | N/A | |
| Add | | | |
| Remove | | A.V.A. | |
| 6) Change | | N/A | |
| Add | | | |
| Remove | | | |

| . <u>If ame</u> Attach) | nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific) |
|----------------------------|---|
| N/A | |
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| . Ifan i | amendment provides for an exchange, reclassification, or cancellation of issued shares, isions for implementing the amendment if not contained in the amendment itself: |
| <u> </u> | if not applicable, indicate N/A) |
| N/A | |
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| The date of each amendment(s) adoption: 08/19/2014 | | , if other than the |
|--|--|---------------------|
| date this document was signed | | |
| Effective date if applicable: | 08/14/2014 | |
| Elective date in applicable. | (no more than 90 days after amendment file date) | |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| | re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval. | |
| | re approved by the sharcholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s): | |
| "The number of vote | s cast for the amendment(s) was/were sufficient for approval | |
| by | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | (voting group) | |
| The amendment(s) was/we action was not required. | re adopted by the board of directors without shareholder action and shareholder | |
| The amendment(s) was/we action was not required. | ere adopted by the incorporators without shareholder action and shareholder | |
| Dated_08/ | 19/2014 | |
| Signature | Alex | |
| | By a director, president or other officer – if directors or officers have not been | |
| | elected, by an incorporator - if in the hands of a receiver, trustee, or other court | |
| a | ppointed fiduciary by that fiduciary) | |
| | SHIRLEY ALVAREZ | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT-DIRECTOR | |
| | (Title of person signing) | |