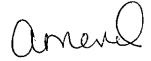
P14000073355

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Na	me)
(Docu	ment Number) .
Certified Copies	Certificate	s of Status
Special Instructions to Fill	ing Officer:	
		,

Office Use Only



800268415538



01/16/15--01016--025 **43.75



BR 1/21/15

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: VIRGEN D		VESTMENT, INC
DOCUMENT NUMBER: P1400007335	05	
The enclosed Articles of Amendment and fee are so	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
ABRAHAM ALC	ALA	
VIRGEN DEL CA	Name of Contact Person ARMEN INVEST	
316 HEATHER H	Firm/Company	
	Address	
HAINES CITY, F	L 33844	
	City/ State and Zip Cod	e
MGCIERI@HOTMA	IL.COM	•
	sed for future annual report	notification)
For further information concerning this matter, plea	ise call:	
IRIS PADILLA	at (407	247-1780
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

VIRGEN DEL CARMEN INVESTMENT USA INC.

2015 JAN 16 AM 10: 55

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known)

P14000073355

ment(s) to

. If amending name, enter the new name of the	ie corporation.		The new
ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "Coord "chartered," "professional association," or	Corp," "Inc," or "Co". A p		ted" or the abbreviation
. Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u>			
		···	·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u></u>		
			·
			
. If amending the registered agent and/or reg new registered agent and/or the new registe		rida, enter the name	<u>of the</u>
Name of New Registered Agent			
	(Florida street address)	}	
New Registered Office Address:		, Florida	
	(City)		(Zip Code)

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	IRIS PADILLA	316 HEATHER HILL BV
X Add	<u> </u>		DAVENPORT FL 33837
Remove			
2) Change			
Add			<u></u>
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:		
(Attach additional sheets, if necessary). (Be specific) NO ADDITIONAL CHANGES		
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,		
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		
(g noi applicable, maicale NA)		

The date of each amendment(s) addate this document was signed.	doption:	if 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 add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statement 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 add action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	2014	
selecte	irector, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	ABRAHAM ALCALA	
	(Typed or printed name of person signing)	
	VICE-PRESIDENT	
	(Title of person signing)	