P1400085486

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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOI	RATION: ROHAN AS BER: P1400008542	SSOCIATES INC 26	<u> </u>		
	of Amendment and fee are su				
Please return all corre	spondence concerning this ma	tter to the following:			
	LUIS MEDINA				
		Name of Contact Perso	n		
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	 		
2460 SW 137 AVENUE #254					
		Address			
	MIAMI, FLORIDA				
	AEDINIA ODELLO	City/ State and Zip Cod	e		
LF	MEDINA@BELLS E-mail address: (to be us	OUTH.NET sed for future annual report	notification)		
			,		
For further information	n concerning this matter, pleas	se call:			
LUIS MEDIN	Α	at (305	, 552-1500		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment 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)		
Mailing Address Amendment Section			Address		
	sion of Corporations	Amendment Section Division of Corporations			
	Box 6327	Clifton Building			
Tall	ahassee, FL 32314	2661 Executive Center Circle			
		Tallaha	assee, FL 32301		

Articles of Amendment Articles of Incorporation of

FILED 14 OCT 24 AN II: 14

ROHAN ASSOCIATES INC

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

P1400085426			
(Document Numbe	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floats Articles of Incorporation:	orida Statutes, this <i>Florida</i>	Profit Corporation adopts the	following amendmen
4. If amending name, enter the new name of th	e corporation:		
ROHA ASSOCIATES INC			The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp, " "Inc," or "Co". A		or the abbreviation
B. Enter new principal office address, if application	able:		
Principal office address <u>MUST BE A STREET A</u>			

			<u> </u>
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE</u>	BOX)		
 If amending the registered agent and/or registered agent and/or the new register 		lorida, enter the name of the	•
	ied office address,		
Name of New Registered Agent			
	(Florida street addre	255)	
New Registered Office Address:	(0,)	, Florida	
	(City)	(Zip	Code)
New Registered Agent's Signature, if changing	Degistered Agents		
hereby accept the appointment as registered ager		accept the obligations of the p	osition.
0:	CM D :		

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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally St	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				 <u> </u>
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add		_		
Remove				

attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	· · · · · · · · · · · · · · · · · · ·
	-
'an amandmant nuavidas far an arah	hange, reclassification, or cancellation of issued shares,
	endment if not contained in the amendment itself:
UI NOI ADDIICADIE INGICAIE N/A 1	
(3 nor approach, maissis 1011)	
(g. nor approximation (NAT)	
(g. i.e. approximation (vitt)	
(g. i.e. approximation (ivit)	
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(g approximation (vitt)	
(3 Spprossot, marcut 1971)	

The date of each amendment(s) addate this document was signed.	option: OCTOBER 20, 2014	, if other than the
Effective date if applicable:		
Effective date it applicable;	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK QNE</u>)	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved 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	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopaction was not required.	sted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopaction was not required.	ted by the incorporators without shareholder action and shareholder	
Dated	12114	
Signature	about Labo	
(Ḥy a dù	ector, president or other officer - if directors or officers have not been	
	by an incorporator – if in the hands of a receiver, trustee, or other court diffiduciary by that fiduciary)	
арроппе	a nauciary by that inducially)	
	(Typed or printed name of person signing)	
-	(Typed or printed name of person signing)	
	Prosident	
_	(Title of person signing)	