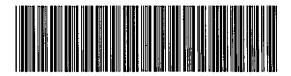
P14000096345

(Re	questor's Name)			
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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: EXPRESS DOCUMENT NUMBER: P1400009634	CAPPUCCINO 5	MAKER, CORP					
The enclosed Articles of Amendment and fee are su		· · · · · · · · · · · · · · · · · · ·					
·	_						
Please return all correspondence concerning this ma	tter to the following:						
NELLY REBOLT	A						
	Name of Contact Person	1					
EXPRESS CAPF	PUCCINO MAKE	R, CORP					
	Firm/ Company						
12484 SW 127 A	12484 SW 127 AVE						
	Address						
MIAMI, FL 33186	5						
	City/ State and Zip Code	2					
NREBOLTA@HOTM	IAIL.COM						
	sed for future annual report	notification)					
For further information concerning this matter, pleas	se call:						
NELLY REBOLTA	_{at (} 305	, 747-5198					
Name of Contact Person	Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:					
■ \$35 Filing Fee	□\$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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301					



Articles of Amendment to Articles of Incorporation of



EXPRESS CAPPUCCINO MAKER, CORP

15 FEB 10 AM 11:07

(Name of Corporation as currently filed with the Florida Dept. of State) P14000096345 (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: 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." B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name_of New Registered Agent (Florida street address) 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 <math>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 Do	o <u>e</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	VP	<u> </u>	SHABANA NAHEED	13150 SW 62ND TERR
Add				APT. 101
Remove				MIAMI, FL 33183
2) Change				
Add		_		
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

illat	ending or adding additional Art hadditional sheets, if necessary).	Be specifi	<u>nange(s) here</u> : <i>c)</i>			
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[P			٠,٠			
prov	amendment provides for an exclusions for implementing the amo	nange, recias endment if no	stitcation, or c	the amendme	nt itself:	
	(if not applicable, indicate N/A)					
		,				

The date of each amendment(s	adoption: 02/02/2015	turt Yakiwaca	्र <u>ें अ</u> पंर्त bther than the
date this document was signed.		DIVISION OF CO	JEGORALIGH:
Effective date <u>if applicable</u> :	02/02/2015	15 FEB 10	AM 11: 07
	(no more than 90 day	s after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The nume sufficient for approval.	ber of votes cast for the amendment(s)	
	approved by the shareholders through to for each voting group entitled to vote s	voting groups. The following statement eparately on the amendment(s):	
	ast for the amendment(s) was/were suff		
by	(voting group)	.,,	
	(voting group)		
action was not required.	adopted by the board of directors without sl		
Dated 02/02	/2015	A ,	
Signature		Mrso.	
sele	a director, president or other office countries, by an incorporator — if in the hand ointed fiduciary by that fiduciary)		
	NELLY REBOLTA		
	(Typed or printed	I name of person signing)	
	PRESIDENT		
	(Title of	person signing)	