## P150000000141

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TALLAMASSEE, FLORIDA

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Amend

APR 0 5 2017

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: DURACO	L CORPORATION	
DOCUMENT NUMBER: P15000006141		
The enclosed Articles of Amendment and fe	ee are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
Gabriel Hatem		
	Name of Contact Perso	n
Tax Care Doral		•
	Firm/ Company	
1400 NW 107th Ave	Ste 430	
	Address	
Sweetwater FL 3317	2	
	City/ State and Zip Cod	e
gabriel@taxcareinc.com		
E-mail address:	(to be used for future annual report	notification)
For further information concerning this matt	ter, please call:	
Gabriel Hatem	at ( <sup>786</sup>	
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amoun	nt made payable to the Florida Depa	artment of State:
\$35 Filing Fee  \$35 Filing Fee  Certificate of S		☐\$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	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

DURACOL CORPORATION	
(Name of Corporation as currently	y filed with the Florida Dept. of State)
P15000006141	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	1," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
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	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
' (Florida stre	ret address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar w	ith 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	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	SD	DURAN, SILVIA V	CARRERA 45 # 44-21 INT. 2
Add			APT. 902
X Remove			BOGOTA, COLOMBIA
2) Change	SD	DURAN, EDUARDO	CARRERA 45 # 44-21 INT. 2
Add			АРТ. 902
X Remove			BOGOTA, COLOMBIA
3 ) Change			
Add		•	
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
		<u> </u>	
	<u> </u>		
an amendment provides for an exch	ange, reclassification, or cancellation	n of issued shares, dment itself:	
rovisions for implementing the ame			
rovisions for implementing the ame (if not applicable, indicate N/A)			
provisions for implementing the ame (if not applicable, indicate N/A)			
provisions for implementing the ame (if not applicable, indicate N/A)			
orovisions for implementing the ame (if not applicable, indicate N/A)	·		
provisions for implementing the ame (if not applicable, indicate N/A)	· · · · · · · · · · · · · · · · · · ·		
orovisions for implementing the ame (if not applicable, indicate N/A)	·		

date this document was signed.	s) adoption:, if other than the
Effective date <u>if applicable</u> :	03/28/2017
Effective date it applicable.	(no more than 90 days after amendment file date)
	his block does not meet the applicable statutory filing requirements, this date will not be listed as the e Department of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
☐ The amendment(s) was/were must be separately provided	e approved by the shareholders through voting groups. The following statement d 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 action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
DatedSignature	23/28/2017 Lauredo Duran Rinilla
(By sel	director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	EDUARDO DURAN PINILLA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)