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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MALABARES IN	C.	
DOCUMENT NUMB	ER:		<u></u>
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	MARILI CANCIO, ESQ.		
•		Name of Contact Persor	1
	CIO MANAGEMENT LLC		
•		Firm/ Company	
	1395 BRICKELL AVENUE,	, #800CJLAW	
•	<u></u>	Address	
	MIAMI, FL 33131		
•	<u> </u>	City/ State and Zip Code	e
MAD	H I CANCIO (ACIELAW CO	M	
MAR	ILI.CANCIO@CJELAW.CO	sed for future annual report	notification)
	E-man address. (to be de	sed for future annual report	HOUTHCation)
For further information	concerning this matter, pleas	se call:	
MARILI CANCIO, ES	SQ	at (305) 200-8696 de & Daytime Telephone Number
Name o	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 Fce	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MALABARES INC.

(Name o	of Corporation as currently filed with the Fl	orida Dept. of State)
P15000020450		₩ (A)
	(Document Number of Corporation (if kr	nown)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Cor	poration adopts the following amendment
A. If amending name, enter the new na	nme of the corporation:	The
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	tain the word "corporation," "company," o ation "Corp," "Inc," or "Co". A profession tion," or the abbreviation "P.A."	or "incorporated" or the abbreviation on the contain the must contain the
B. Enter new principal office address, (Principal office address MUST BE A ST		
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> of		
D. If a manding the registered agent on	d/or registered office address in Florida, en	for the name of the
new registered agent and/or the nev		ter the name of the
Name of New Registered Agent	CIO MANAGEMENT LLC	
	1395 BRICKELL AVENUE, #800CJLAW	
	(Florida street address)	
New Registered Office Address:	MIAMI	, Florida 33131
	(City)	(Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	hanging Registered Agent: tered agent. I am familiar with and accept the Signature of New Registered Agent, if	
	V	

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>	Address
1) Change	VP	BEGONA UBIERNA	1395 BRICKELL AVE#800
X Add			MIAMI, FL 33131
Remove			
2) Change			
Add			
Remove			•
3) Change		_	
Add		•	
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an evol-	nange, reclassification, or cancellation of issued shares,
<u>r en empuomoni provinca ioi ali CXCII.</u>	tanget rectassifications of cancellation of issued sharest
provisions for implementing the amer	andment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
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provisions for implementing the amer	ndment if not contained in the amendment itself:

APRIL 30, 2015 The date of each amendment(s) adoption: _____, if other than the date this document was signed. . . Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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 (voting group) ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. APRIL 30, 2015 Dated Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporaton - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) MONTSERRAT VALLE (Typed or printed name of person signing) **PRESIDENT** (Title of person signing)