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SECRETARY OF STATE DIVISION OF CORFORATIONS

Amund 1013/20115

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	D450000340		MMUNICATIONS INC
DOCUMENT NUM	BER: 1 130000240		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	ALEJANDRA TR	OCONIS	
		Name of Contact Person	1
	SOLAVAD MARKE	ETING AND COM	MUNICATIONS INC
		Firm/ Company	
	7265 N AUGUST	A DR	
		Address	
	HIALEAH, FL 330	015	
		City/ State and Zip Cod	e
۸۱		ANICOCMAIL C	OM
AL	EJANDRATROCO		
	E-mail address: (to be us	sed for future annual report	notification)
T 0 4 1 6 4		.,	
For further informatio	n concerning this matter, pleas	se call:	
ALEJANDRA	TROCONIS	_{at (} 786	, 541-4114
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or 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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address		Street Address	
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



SOLAVAD MARKETING AND COMMUNICATIONS INC

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

(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:	NA	The ne
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or " word "chartered," "professional association," or the abbreviation	Co". A professional corporation	ted" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		of the
Name of New Registered Agent (Florida et	reet address)	
·	,	
New Registered Office Address: (City)	Florida	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	<u>:</u> with and accept the obligations o	f the position.
Signature of New Paristaned	Acoust if abouting	

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>\$V</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	Р	ALEJANDRA TROCONIS	7265 N AUGUSTA DR	
Add			HIALEAH, FL 33015	
Remove			<u></u> .	
2) Change				
Add	•			
Remove				
3) Change				
Add				
Remove				
4) Change				
Add			· · · · · · · · · · · · · · · · · · ·	
Remove				
			•	
5) Change			-	
Add				
Remove				
6) Change				
Add				
Remove				

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)	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
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(if not applicable, indicate N/A)	f an amendment provides for an exchange, reclassification, or cancellation of issued shares,
NA	(if not applicable, indicate N/A)
NA	
NA	
N/H	
	NIL
	17/11
	r

The date of each amendment date this document was signed	t(s) adoption: WARCH 12, 2015	, if other than the
Effective date if applicable:	MARCH 12, 2015	
<u></u>	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated MA	RCH 12, 2015	
Signature	(Alijandajárala	
So	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	ALEJANDRA TROCONIS	
	(Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	