orida Department of S

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000013083 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : FASTKIT CORP

Account Number : I20100000009

Phone

: (305)599-0839

Fax Number

: (305)592-9591

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN

LAS TRES B CORP

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

JAN 1 9 2016

SECOTTARY OF STATE OF

Articles of Amendment to Articles of Incorporation of 16 JAN 15 AM 10: 11

LAS TRES B CORP	
(Name of Corporation	on as currently filed with the Florida Dept. of State)
P15000043321	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	2 Statutes, this Florida Profit Corporation adopts the following amendmen
A. If amending name, enter the new name of the co-	rporation:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the c	d "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>	
Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<i></i>
•	·
D. If amending the registered agent and/or registere new registered agent and/or the new registered o	ed office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	. —
-	(Florida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Office Address: New Registered Agent's Signature, if changing Regis	(City) , Florida, Florida, Elorida, Elorida
	I am familiar with and accept the obligations of the position.
Siona	ture 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 nacessary)

Please note the officer/director title by the first letter of the office title:

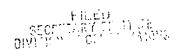
P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director 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	PT	John Doe		
X Remove	<u>y</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name .	Address	
I) Change	DIR	MORALES CABRERA, ROLANDO	714 E 50 ST	
X Add			HIALEAH, FL. 33013	
Remove				
2) Change				
Add	-			
Remove				
3)Change	**			
Add				
Remove		•		
4) Change			<u></u>	
Add				
Remove				
5) Change				
Add			*····	
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	- Alter and a second se
	,

	·
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:



	01/15/2016
The date of each amendment(s) adoption date this document was signed.	: 16 JAN 15 AM 10: 1 , if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block document's effective date on the Departme	oes not meet the applicable statutory filing requirements, this date will not be listed as the nt of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.
☐ The amendment(s) was/were approved to must be separately provided for each verified to the separately provid	by the shareholders through voting groups. The following statement ofting group entitled to vote separately on the amendment(s):
"The number of votes cast for the	amendment(s) was/were sufficient for approval
by	, n
	(voling group)
☐ The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder
01/15/2016	·
Dated	
selected, by an	president or other officer — if directors or officers have not been incorporator — if in the hands of a receiver, trustee, or other court clary by that fiduciary)
GUDE	LIO MORALES PINERO
	(Typed or printed name of person signing)
Presi	DENT
	(Title of person signing)