

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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FILED P. 002 SECRETARY OF STATE DIVISION OF CORPORATIONS

Articles of Amendment to Articles of Incorporation 15 JUN 29 AM 11: 15

(Name	of Corporation as currently filed with the Florida Dept. of State)	
P15000044074		
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Corporation adopts the following amer	lment
A. If amending name, enter the new na	ame of the corporation:	
		12W
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered." "professional associa	tain the word "corporation," "company," or "incorporated" or the abbrevia nation "Corp," "Inc," or "Co". A professional corporation name must contain tion," or the abbreviation "P.A."	ion the
B. Enter new principal office address,		_
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	
		_
		_
C. Your and and the said decree of the said	C.A.	
C. Enter new mailing address, if appli	icania.	
(Mailing address MAY BE A POST		_
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(Mailing address MAY BE A POST	OFFICE BOX)	- - -
(Mailing address MAY BE A POST) D. If amending the registered agent an	d/or registered office address in Florida, enter the name of the	- - -
Mailing address MAY BE A POST. D. If amending the registered agent an new registered agent and/or the new	office BOX) id/or registered office address in Florida, enter the name of the vegistered office address;	
(Mailing address MAY BE A POST) D. If amending the registered agent an	d/or registered office address in Florida, enter the name of the	new riation
Mailing address MAY BE A POST. D. If amending the registered agent an new registered agent and/or the new	office BOX) id/or registered office address in Florida, enter the name of the vegistered office address;	
Mailing address MAY BE A POST. D. If amending the registered agent an new registered agent and/or the new	od/or registered office address in Florida, enter the name of the vegistered office address: ISMAR JIMENEZ	
(Mailing address MAY BE A POST of the Mailing address MAY BE A POST of the Mailing the registered agent an new registered agent and/or the new Name of New Registered Agent	OFFICE BOX) Id/or registered office address in Florida, enter the name of the vegistered office address: ISMAR JIMENEZ 6423 SW 136 CT UNIT B (Florida street address)	
Mailing address MAY BE A POST. D. If amending the registered agent an new registered agent and/or the new	OFFICE BOX) Id/or registered office address in Florida, enter the name of the vegistered office address: ISMAR JIMENEZ 6423 SW 136 CT UNIT B (Florida street address)	
(Mailing address MAY BE A POST of Mailing address May Be address a Post of May Be a Post o	Ad/or registered office address in Florida, enter the name of the vegistered office address: ISMAR IIMENEZ 6423 SW 136 CT UNIT B (Florida street address) MIAMI , Florida 33183	-
(Mailing address MAY BE A POST of Mailing address May Be address May Be address Mailing address May Be a Post of May Be a Post	Ad/or registered office address in Florida, enter the name of the vegistered office address: ISMAR IIMENEZ 6423 SW 136 CT UNIT B (Florida street address) MIAMI , Florida 33183	
(Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent New Registered Office Address:	Ad/or registered office address in Florida, enter the name of the vergistered office address: ISMAR JIMENEZ 6423 SW 136 CT UNIT B (Florida street address) MIAMI , Florida (City) (Zip Code)	- -
(Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if c	Ad/or registered office address in Florida, enter the name of the vergistered office address: ISMAR JIMENEZ 6423 SW 136 CT UNIT B (Florida street address) MIAMI , Florida (City) (Zip Code)	
(Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if c	Ad/or registered office address in Florida, enter the name of the registered office address: ISMAR IIMENEZ 6423 SW 136 CT UNIT B (Florida street address) MIAMI (City) (Zip Code)	
(Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if c	Ad/or registered office address in Florida, enter the name of the registered office address: ISMAR IIMENEZ 6423 SW 136 CT UNIT B (Florida street address) MIAMI (City) (Zip Code)	-

Example:

If amending the Officers and/or Directors, enter the fitle 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.

X Change	<u></u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sy</u>	Saily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	YENABEL H. MOSQUERA	6423 SW 136 CT
Add			d TINU
X Remove			MIAMI, FL 33183
2) Change	P	ISMAR IIMENEZ	6423 SW 136 CT
X Add			UNIT B
Remove			MIAMI, FL 33183
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<u>.</u>		
Add			
Remove			
6) Change			
Add			
Remove			

Add EIN	: 47- UNIL	1590			
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. If an amendment provid	les for an exchange, real	assification, or cance	ellation of issued shar	·e.s.	
provisions for impleme	nting the amendment if	not contained in the	amendment itself:	<u></u>	
(if not applicable, ir	idicate N/A)				
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FAX No.

P. 005

DIVISION OF GORPORATIONS 06/10/2015 The date of each amendment(s) adoption: , if other than the 15 JUN 29 AM 11: 15 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(3) 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. 06/10/2015 Dated Jaman Jimenez Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) ISMAR JIMENEZ (Typed or printed name of person signing)

(Title of person signing)

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