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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: H & HNOS, INC					
DOCUMENT NUMBI	P15000050165				
The enclosed Articles of	f Amendment and fee are sui	bmitted for filing.			
Please return all corresp	oondence concerning this mat	tter to the following:			
1	ROBERTO PENATE				
-		Name of Contact Persor	1		
1	RUMBOS EXPRES INC				
-		Firm/ Company			
	10201 HAMMOCKS BLVD # 109 A				
_	Address				
1	MIAMI.FL.33196				
-		City/ State and Zip Code	2		
roberto	@rumbosexpress.com				
	·	sed for future annual report	notification)		
	`	•			
For further information	concerning this matter, pleas	se call:			
ROBERTO PENATE		.786	296 6654		
	f Contact Person	at (786) de & Daytime Telephone Number		
Name 0	r Comact reison	Aica Co	de & Daytine Telephone Number		
Enclosed is a check for	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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amer Divis P.O.	ing Address Indment Section Ition of Corporations Box 6327 Industrial Box 6327	Amend Divisio Clifton	Address Iment Section on of Corporations Building		

Tallahassee, FL 32301

Articles of Amendment . to Articles of Incorporation of

网络沙沙

15 JUN 25 雄川: 48

(Name o	f Corporation as curren	tly filed with the Florida Dept. of State)	
H & HNOS, INC	ALLAMASSEE, FLORIDA		
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new na	me of the corporation:		
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	The new ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."	
B. Enter new principal office address, if applicable:		16260 SW 95 ST	
(Principal office address MUST BE A S		MIAMI FL 33196	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		10201 HAMMOCKS BLVD # 109 A	
		MIAMI. FL. 33196	
		,	
D. If amending the registered agent an	d/or registered office ad	dress in Florida, enter the name of the	
new registered agent and/or the nev			
Name of New Registered Agent	N/A		
	(Florida s	street address)	
New Registered Office Address:	N/A	. Florida	
New Negistereu Office Hauress.		(City) (Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agei ered agent. I am familia	nt: r with 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.

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Kemove			
6) Change	<u></u>		
Add			
Remove			

E. If amending or adding additiona (Attach additional sheets, if necess.)	Articles, enter change(s) here: ary). (Be specific)
N/A	
F. If an amendment provides for a	exchange, reclassification, or cancellation of issued shares,
provisions for implementing the (if not applicable, indicate N	amendment if not contained in the amendment itself:
N/A	•••
	<u> </u>

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	 I/A	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amend sufficient for approval.	dment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment(
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sha	reholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareho	lder
Dated	06/20/15	
Signature		
(By	a director, president or other officer – if directors or officers have no	
	cted, by an incorporator – if in the hands of a receiver, trustee, or othe binted fiduciary by that fiduciary)	ner court
арр	2 in 0 = 1	
	Roserto Kenali	
	(Typed or printed name of person signing)	
	President.	
	(Title of person signing)	