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2017 AUG -7 A II: 42
SECRETARY OF STATE
AND ANASSEE, FLORIDA

AUG 1 5 2017



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: NAIM INVESTM	ENT CORP		
DOCUMENT NUMB				
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	NESTOR ARAQUE			
•	-	Name of Contact Person	1	
	NAIM INVESTMENT COR	p		
		Firm/ Company		
	950 SOUTH PINE ISLAND	• •	CE 1035	
•	Address			
	PLANTATION, FL 33324			
		City/ State and Zip Code	e	
n.arao	ueramirez@gmail.com			
	1,5	sed for future annual report	notification)	
		·		
For further information	concerning this matter, pleas	se call:		
NESTOR ARAQUE		305 at (	8511127 de & Daytime Telephone Number	
Name o	f 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:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address  Amendment Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314		Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

NAIM INVESTMENT CORP

(Name of Corporation as curren	AL CLARACTER DE PROPERTO		
	otly filed with the Florida DepolitiScitts -7 A 11: 42		
15000074546	-		
(Document Number	of Corporation (if known)   SECRETARY OF STATE   TALLAHASSEE, FLORIDA		
ursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:			
If amending name, enter the new name of the corporation:			
one must be distinguishable and contain the word "corporati Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or ord "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the		
Enter new principal office address, if applicable:	1267 S PINE ISLAND RD		
rincipal office address MUST BE A STREET ADDRESS )	PLANTATION, FL 33324		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1267 S PINE ISLAND RD		
	PLANTATION, FL 33324		
If amending the registered agent and/or registered office add	dress in Florida, enter the name of the		
new registered agent and/or the new registered office address			
Name of New Registered Agent	AL SERVICES CORP		
1267 S PINE ISLAND R	:D		
(Florida s	street address)		
PLANTATION	. Florida 33324		
New Registered Office Address:			

## 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 F. 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>Y</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) X Change	P	ARAQUE RAMIREZ NESTOR A	1267 S PINE ISLAND RD	
Add			PLANTATION, FL 33324	
Remove				
2) X Change	VP	MEJIA BRACHO ISKRA G	1267 S PINE ISLAND RD	
Add			PLANTATION, FL 33324	
Remove				
3.) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
51 Change				
Add				
Remove				
6) Change				
Add	-			

Attach additional sheets, if necessary).	(Be specific)			
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		tion, or cancellati	on of issued share	<u>5,</u>
f an amendment provides for an exch	ange, reclassifica- adment if not con	tained in the ame	ndment itself:	
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassifica ndment if not con	tained in the ame	ndment itself:	
provisions for implementing the amei	ange, reclassifica ndment if not con	tained in the ame	ndment itself:	
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f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not con	tained in the ame	ndment itself:	

	07/26/2017	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
	26/2017	
Effective date <u>if applicable</u> :	(no more than 90 days af	
	(no more than 90 days af	ter amendment file date)
<b>Note:</b> If the date inserted in this document's effective date on the D	block does not meet the applicable state epartment of State's records.	utory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number ufficient for approval.	of votes east for the amendment(s)
☐ The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting each voting group entitled to vote sepa	ng groups. The following statement rately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficie	nt for approval
by	(voting group)	
	(voting group)	
The amendment(s) was/were ad action was not required.	opted by the board of directors without s	shareholder action and shareholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without share	holder action and shareholder
Dated(	27-27-2017. Distortione:	
Signature	Local Macro	
(By a c	director, president or other officer – if di	rectors or officers have not been
selecte	ed, by an incorporator $\stackrel{\mathbf{v}}{-}$ if in the hands o	f a receiver, trustee, or other court
арроіі	ited fiduciary by that fiduciary)	
	NESTOR A ARAQUE RAMIREZ	
	(Typed or printed name of p	erson signing)
	PRESIDENT	
	(Title of person	signing)