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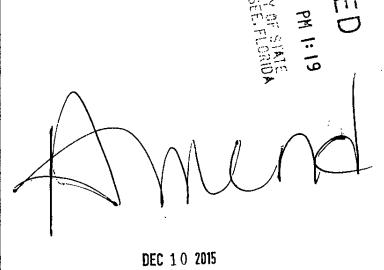
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COVER LETTER

Division of Corporations NAME OF CORPORATION: MAUEL CRUZ, INC **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SARA FLORES Name of Contact Person **SUN TAX & SERVICES** Firm/ Company 8051 N TAMIAMI TRAIL STE BI Address SARASOTA, FL 34243 City/ State and Zip Code sfaccountingsolutions@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: SARA FLORES Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & **□\$43.75** Filing Fee & **\$35** Filing Fee □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Ft 32314 Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

is enclosed)

Articles of Amendment to Articles of Incorporation of

ROISDEC TED MANUEL CRUZ, INC (Name of Corporation as currently filed with the Florida Dept. of State P15000086053 (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: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 3423 17th ST E B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Bradenton, FL 34208 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar 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.

Example: X_Change	PT	John Do	<u>e</u>				
X Remove	· <u>v</u>	Mike Jo	nes				
X Add	<u>sv</u>	<u>Sally Su</u>	nit <u>h</u>				
Type of Action (Check One)	<u>Title</u>		Name			<u>Addres</u> s	
1) Change				 			
Add	J						
Remove							
2) Change							
Add		٠				VI FIRET III.	
Remove							
3) Change		 ·		 			
Add							
Remove							-
4) Change		 -		 			····
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Remove						**********	
5) Change		·····		 			
Add							
Remove							
6) Change	<u></u>			 			
Add							
Remove							

Attach additional sheets, if necessary).	(Be specific)
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an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

date this document was signed.	loption:, if other than the
_	5/2015
Effective date if applicable:	
<u></u> .	(no more than 90 days after amendment file date)
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement 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
hv	, ,,
· · · · · · · · · · · · · · · · · · ·	(voting group)
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder
11/15/2015 Dated	
Signature M	irector, president or other officer – if directors or officers have not been
selecte	d, by an incorporator - if in the hands of a receiver, trustee, or other court
appoin	ted fiduciary by that fiduciary)
	MAUEL CRUZ
	(Typed or printed name of person signing)
	PRESUDET
	(Title of person signing)