P15000097178

equestor's Name)				
dress)				
dress)				
ry/State/Zip/Phon	e #)			
☐ WAIT	MAIL.			
siness Entity Nar	ne)			
ocument Number)				
_ Certificates	s of Status			
Special Instructions to Filing Officer:				
	:			
	;			
	dress) dress) y/State/Zip/Phone WAIT siness Entity Nare cument Number) Certificates			

Office Use Only



800280214108

800280214108 12/21/15--01056--043 **35.00

FILE U

SECRETARY OF SOME

brumo

DEC 28 2015 D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	aira CA. Inc
DOCUMENT NUMBER: P15000	297178
The enclosed Articles of Amendment and fee are submitte	ed for filing.
Please return all correspondence concerning this matter to	the following:
Brica bel	ume of Connect Person
CALAS CO	Firm/ Company
2000 panes	e de Leun Blud 16FL
Coral Gal	ry/ State and Zip Code
E-mail address (to be beed for	r future annual report notification)
For further information concerning this matter, please call:	: <u> </u>
Brico blorge Name of Contact Person	at Code & Daytime Telephone Number
Enclosed is a check for the following amount made payabl	
Certificate of Status C	43.75 Filing Fee & Sertified Copy Certified Copy Additional copy is Certified Copy (Additional Copy is enclosed) 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

01	
Decanira C.A.	The
(Name of Corporation as currently f	iled with the Florida Dept. of State)
71505054497176	
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatitis</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.A.	". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	As 5
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	The same of the sa
	200
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	ŵ
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent CALAS Col	(1)
200 = 0	
(Florida street	address) and the result of the
New Registered Office Address: CURAL (X	Florida 33 13 (Zip Code)
· ·	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position
,	
Signature of New Yog	istered 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	<u>PT</u>	John D)oe	
X Remove	<u>v</u>	Mike J	ones	
_X Add	<u>sv</u>	Sally S	<u>Smith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change Add	VP)	Artwill Salazer	# 4505
Add Remove				MIAM), FZ 33131
2) Change Add		_		
Remove 3) Change				
Add	- 1			
4) Change Add	***************************************			
Remove				
5) Change Add				
Remove				
6) Change Add	<u></u> .			
Damaria				

	ng or adding additional Ar ditional sheets, if necessary).	. (Be specific)			
					•
		. ""			·
		,			
f an amai	ndment provides for an exc	ohongo roclassifica	tion or concellation	of icenad shares	
provision	ns for implementing the amout applicable, indicate N/A)	endment if not con	tained in the amends	nent itself:	
				,	

The date of each amendment(s) adoption:	12	14/	15		, if	other (than the
date this document was signed.	~ 1	· , ;	•				
Effective date <u>if applicable</u> :	(no more the	an 90 days	after amendmer	nt file date)			
Note: If the date inserted in this block does a document's effective date on the Department of			atutory filing re	equirements, this date	will not b	e lister	d as the
Adoption of Amendment(s) (CI	IECK ONE)						
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. approval.	The number	er of votes cast t	for the amendment(s)			
The amendment(s) was/were approved by the must be separately provided for each voting					t		
"The number of votes cast for the ame	ndment(s) was	/were suffic	cient for approve	ıl			
by				,,, 			
(vo	ting group)						
☐ The amendment(s) was/were adopted by the action was not required.	board of direc	tors withou	t shareholder ac	tion and shareholder			
☐ The amendment(s) was/were adopted by the action was not required.	incorporators	without sha	reholder action	and shareholder			
Dated	2 Por	officer – if	directors or offi	cers have not been			
	orporator - if i	n the hands		ustee, or other court			
	UIS R	ana	OCO f person signing	<u> </u>			
	•		r person signing	·) 			
	Presu	ilu	4				
	(T	itle of perse	on signing)		SECRE Duch	15 DEC 21	
						PH	