

OCT 04 2016

R. WHITE

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September 21, 2016

CASTOR B CASTINEIRA 3701 SW 139TH AVE MIAMI, FL 33175

SUBJECT: KAST INC

Ref. Number: P16000012335

We have received your document for KAST INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

All pages must be included in the articles of amendment. Please find enclosed and complete the missing pages.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 916A00020300

16 OCT -3 PM I2: 04
DEPARTHEN OF STATE
DIVISION OF CORPORATION

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: KAST INC		
DOCUMENT NUM	D16000012225		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	CASTOR B CASTINEIRA		
		Name of Contact Perso	n
	KAST INC		
		Firm/ Company	
	3701 SW 139TH AVE		
		Address	
	MIAMI FL 33175		
		City/ State and Zip Cod	e
C 4.5%			
CAS	TOR.MBG@OUTLOOK.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
CASTOR B CASTIN	ElRA	at (329 0952
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or 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)
Amo Divi P.O.	iling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

The state of the s

Articles of Amendment to

Articles of Incorporation of

16 OCT -3 AH 10: 47 SECRETALY OF STATE TALLAMASTER FURIDA

Kast Inc.	
(Name of Corporation as currently	v filed with the Florida Dept. of State)
P16000012335	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida 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 "Oword "chartered," "professional association," or the abbreviation "I	n." "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2946 NW 99+HC+ DONAL, FL 3317Z
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3701 SW 139 ANE MIAMI PC 33175.
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	
Name of New Registered Agent LAU/7. (AS	40//0
(Florida stre	
New Registered Office Address: 2946 NW 994HC+ D	Dens, f , Florida 33172
((Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position. (15-1,116 rgistered 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 Doe	
X Remove	¥	Mike Jones	
X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	RAUL GUILLERMO CASTILLO	7474 NW 116 AVE
X Add			DORAL FL 33178
Remove			
2) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
3) Change	<u> </u>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			****
6) Change			
Add			
Remove			

	(Be specific)
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adoption:	09/15/20	, if other than
date this document was signed.	<i>(</i>	
Effective date if applicable:	09/25/2016	
	(no more than 90 days bfter amen	adment file date)
Note: If the date inserted in this block does not document's effective date on the Department of St		ing requirements, this date will not be listed as
Adoption of Amendment(s) (CHE)	CK ONE)	
he amendment(s) was/were adopted by the shareholders was/were sufficient for app		cast for the amendment(s)
☐ The amendment(s) was/were approved by the s must be separately provided for each voting gr		
"The number of votes cast for the amendr		pproval
by(voting		······································
(voting	g group)	
The amendment(s) was/were adopted by the boaction was not required.		der action and shareholder
☐ The amendment(s) was/were adopted by the incaction was not required.	corporators without shareholder a	ction and shareholder
Dated 09/25/	2016	Mulif
Signature(By a director, preside	ent or other officer – if directors o	or officers have not been
	orator - if in the hands of a receive	
	ASTOR B. CAS	STI NEIRA
` '		<i>6</i>
<i>\theta</i>	resident (Title of person signing)	
	(Title of person signing))