

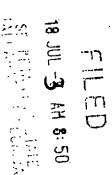
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R. WHITE JUL 0 6 2018

COVER LETTER

TO: Amendment Section Division of Corporations

JOHNS CA CORP NAME OF CORPORATION: _ P16000033879 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Joseph A. Carballo (Name of Contact Person) Carballo Law, PA (Firm/ Company) 2355 Salzedo Street, Suite 300 (Address) Coral Gables, FL 33134 (City/ State and Zip Code) joe@carballolaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Joseph A Carballo 305 673-8300 (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

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JOHNS CA CORP

	JOHNS CA CORP	ST TITLE OF STREET
(Name of Corporation as	currently filed with the Flor	ida DeptAof State) FEGIADA
P16000033879		
(Document	t Number of Corporation (if ki	nown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
name must be distinguishable and contain the word "c	ornoration" or "incorporated	The new T or the abbreviation "Corp," or "Inc."
"Company" or "Co." may not be used in the name.	wipor anno or men per ance	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
	 .	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>X</u>)	
D. If amending the registered agent and/or register		enter the name of the
new registered agent and/or the new registered of	office address:	
Name of New Registered Agent:	 	
_		
New Registered Office Address:	{F/	orida street uddress)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regil hereby accept the appointment as registered agent.		the obligations of the position.
	,	
	Signature of New Regist	ered 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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Santiago Garcia	480 Ocean Blvd
Add			Golden Beach, FL 33160
Remove	D	Boris J. Hernandez	460 Ocean Blvd
2) Change Add			Golden Beach, FL 33160
Remove 3) Change	D	Michael J. Hernandez	460 Ocean Blvd
X Add Remove			Golden Beach, FL 33160
4) Change	D	Jacqueline Crockett	460 Ocean Blvd
X Add			Golden Beach, FL 33160
Remove			
5) Change Add			
Remove			
6)Change			
Add Remove			

. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
[
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	_
	 -

	The date of each amendment(s) adoption:late this document was signed.		, if other than the
	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
		block does not meet the applicable statutory filing requirements, this date will not Department of State's records.	ot be listed as the
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/wer was/were sufficient for app	e adopted by the members and the number of votes cast for the amendment(s) oval.	
	There are no members or madopted by the board of dir	embers entitled to vote on the amendment(s). The amendment(s) was/were ectors.	
	Dated	7/12/13 11	
	Signature	1101	
	(By the c have no	hairman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or urt appointed fiduciary by that fiduciary)	
	Bori	J. Hernandez	
		(Typed or printed name of person signing)	
	Presi	dent	
		(Title of person signing)	