Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN CONSULATION DESIGN INC.

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JUL 29 2016

C. CARROTHERS

7/28/2016 12:09:29 PM From: To: 8506176380(2/6)

COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: ____ DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kimberly Cobiella Name of Contact Person Consultatio Design Inc. Firm/ Company 1395 Brickell Avenue, Suite 950 Address Miami FL 33131 City/ State and Zip Code kcobiella@consultatiousa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786) 414-2910
Area Code & Daytime Telephone Number Kimberly Cobiella Name of Contact Person 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 Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

7/28/2016 12:09:29 PM From: To: 8506176380(3/6)

Articles of Amendment to Articles of Incorporation of

CONSULATION DESIGN INC.		
,	as currently filed with the Florida Dept	. of State)
P16000059728	ANI-about of Communition (if Image)	
(Documen	t Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	tatutes, this Florida Profit Corporation at	lopts the following amendment(
A. If amending name, enter the new name of the corp	orațios:	
CONSULTATIO DESIGN INC.		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A professional corpore	orated" or the abbreviation
• •	- · · · · · · · · · · · · · · · · · · ·	÷9 2
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.	ESS	
ermopa office address <u>most mon street militare</u>		<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		— co
Transing unit ela tracta in the tracta of the both		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		ne of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
•	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I d	ered Agent: im familiar with and accept the obligation	ış of the position.
Signate	are of New Registered Agent, if changing	

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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.

<u>X.Change</u>	PT	John Doc						
X Remove	¥	Mike Jones						
_X Add	<u>sy</u>	Sally Smith						
Type of Action (Check One)	Title	Name	Address					
1) Change								
Add Remove								
2) Change	<u></u>							
Add Remove								
3) Change								
Remove								
4) Change								
Remove								
5) Change								
Remove								
6) Change								
Remove								

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	<u> </u>

f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
	ML
•••	

7/28/2016	12:09:29	PM	From:	To:	8506176380(6/6)

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 07 27 119	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – it in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Maicos Corti-Madeina	
(Typed or printed name of person signing)	
President	
(Title of person signing)	