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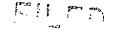


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR		PINC	
DOCUMENT NUME	BER:		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this mat	tter to the following:	
	Carlos Chaves		
		Name of Contact Persor	1
	Cardali Group Inc		
	Firm/ Company		
	2717 Michigan Ave		
		Address	
	Kissimmee, Fl, 34744		
		City/ State and Zip Code	2
carda	ligroupinc@gmail.com		
		ed for future annual report	notification)
	•	•	•
For further information	n concerning this matter, pleas	e call:	
Carlos Chaves		at (8443358
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	ertment 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of



2816 NOV 28 P 12: ELI

	7	f 5
of Corporation as currentl	y filed with the Florida Dept. of State)	zA.
(Document Number of	f Corporation (if known)	
1006, Florida Statutes, this	Florida Profit Corporation adopts the following	ng amendment
me of the corporation:		
		The new
ation "Corp," "Inc," or "	Co". A professional corporation name must	 bbreviation
·	NONE	
<u>cable:</u> OFFICE BOX)	NONE	
		.
d/or registered office addi	ress in Florida, enter the name of the	
v registered office address	<u>:</u>	
NONE		_
(Florida str	reet address)	-
(Florida str	reet address) Florida	_
	(Document Number of 1006, Florida Statutes, this time of the corporation: Itain the word "corporation ation "Corp," "Inc," or "Ition," or the abbreviation "tion," or the abbreviation if applicable: TREET ADDRESS) Cable: OFFICE BOX d/or registered office address of the statute of the st	tain the word "corporation," "company," or "incorporated" or the action "Corp," "Inc," or "Co". A professional corporation name must tion," or the abbreviation "P.A." NONE TREET ADDRESS NONE NONE MONE MON

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Carlos Andres Chaves	1821 Bridgeview Cir,
X Add			Orlando, Fl, 32824
Remove			
2) Change	D	Martha Chaves	1821 Bridgeview Cir
X Add		_	Orlando, fl, 32824
Remove		,	
3) Change		_ <u>n/a</u>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			·
Remove			

E. If amending or adding additional A (Attach additional sheets, if necessary	<u>articles, enter change(s) here</u> : v). (Be specific)
NONE	20
· · · · · · · · · · · · · · · · · · ·	
	
•	
. If an amendment provides for an ex	xchange, reclassification, or cancellation of issued shares,
provisions for implementing the ar	mendment if not contained in the amendment itself:
(if not applicable, indicate N/A) NONE	l
ONE	
<u> </u>	

, •	11/01/2016	
The date of each amendment(s date this document was signed.) adoption:	, if other than th
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, the Department of State's records.	nis date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendre sufficient for approval.	nent(s)
	approved by the shareholders through voting groups. The following st for each voting group entitled to vote separately on the amendment(s)	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and share	holder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and sharehold	er
DatedSignature	Cu fix in ful	
(By	a director, president or other officer - if directors or officers have not cted, by an incorporator - if in the hands of a receiver, trustee, or other	
арр	ointed fiduciary by that fiduciary)	
	CARLOS ALBERTO CHAVES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	