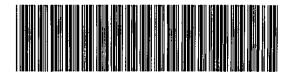
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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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SEP 2 6 2015 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

·	•			
NAME OF CORPORATION: LEE JAY'S PET I	LESORT & SPAW INC			
DOCUMENT NUMBER: PIG 0000 65 993				
The enclosed Articles of Amendment and fee are submitted for filir	ng.			
Please return all correspondence concerning this matter to the follow	ving:			
MAURICIO DAVI	LA ntact Person			
TAX CAKE DLUS" INC Firm/ Company				
2531 NW 72nd Avenue Address				
High FL City/ State a	33122 nd Zip Code			
E-mail address: (to be used for future an	nual report notification)			
For further information concerning this matter, please call:				
Turan Granaria at (786) 362-9619 . Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the F	lorida Department of State:			
S35 Filing Fee S43.75 Filing Fee S43.75 Filing Fee Certificate of Status Certified C (Additional enclosed)	opy Certificate of Status			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	01				
		CT & SPAW INC			
(Name of Cor	poration as currently f	iled with the Florida Dep	t. of State)		
\widetilde{q}	16000065993				
	Document Number of C	orporation (if known)			
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Flo	orida Profit Corporation a	dopts the followi	ng amen	dment(s) to
A. If amending name, enter the new name o	f the corporation:				
CEE JAYIS PET RESON	I & SDAW TI	NC		The	ทอพ
name must be distinguishable and contain to "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	he word "corporation," "Corp." "Inc." or "Co	' "company," or "incorpe '': A professional corpore	orated" or the cation name must	abbrevia	tion
B. Enter new principal office address, if app (Principal office address MUST BE A STREE			-		_
					_
				(1) (1)	- 678 - 678
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI		Nla		<u> </u>	33
(ag	 /	- 11,		<u>بَرِيْ حَرِدٍ</u> ريادي	_0
				(2015) 1716 1716	~
		 		: F4 	_≕ ¦
D. If amending the registered agent and/or new registered agent and/or the new regi		s in Florida, enter the nar	ne of the	NORIO NORIO	7:09
Name of New Registered Agent	NA				
	ئةاك	h	5.11.	_	
. —	(Florida street	address)		_	
New Registered Office Address:	NA		. Florida		
Ten regulered System ranges.		ity)	.,	Code)	
New Registered Agent's Signature, if changi I hereby accept the appointment as registered of		h and accept the obligation -	s of the position.		
	Signature of New Reg	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, an
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 <math>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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		NA	
Add			
Remove			
2) Change		Ulp	
Add		•	
Remove		Ağı ağı '40 4şı -	
3) Change		<u>N</u> M	
Add			
Remove			
4) Change		NIA	
Add			
Remove			•
5) Change		nla.	
Add	-	வை விடிட்ட	
Remove			
6) Change		N/A	
Add			- MANUFACTURE TO THE PROPERTY OF THE PROPERTY
Pomovo			

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	App. App
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	•
an amendment provides for an exchange, reclassific	ation, or cancellation of issued shares,
provisions for implementing the amendment if not co	ntained in the amendment itself:
(if not applicable, indicate N/A)	
NA	\$ 6 44.
·	
•	
,	·
,	

The date of each amendment(s) adoption:	N/A	, if other than the
date this document was signed.	·	
Effective date if applicable:	NA	
	(no more than 90 days after amendment file o	date)
Note: If the date inserted in this block does not document's effective date on the Department of St		ments, this date will not be listed as the
Adoption of Amendment(s) (CHE	CK ONE)	
The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for ap		amendment(s)
☐ The amendment(s) was/were approved by the s must be separately provided for each voting g		
"The number of votes cast for the amend	ment(s) was/were sufficient for approval	
by <i>ر</i> ا	g group)	
(votin	g group)	
☐ The amendment(s) was/were adopted by the boaction was not required. ☐ The amendment(s) was/were adopted by the in	·	
action was not required.	•	
Dated 9/23/2014	,	
Signatura		
Signature	ent or other officer + If directors or officers h	ave not been
selected, by an incorr	porator if in the hands of a receiver, trustee,	or other court
appointed fiduciary b		
	ITUAN GIALIARZA	
(T	yped or printed name of person signing)	
· .	PRESIDENT	
	(Title of person signing)	