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Amend

APR 17 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PLE	EASURE PLAY	' INVESTMENTS INC			
DOCUMENT NUMBER: P170000					
The enclosed Articles of Amendmen	t and fee are su	bmitted for filing.			
Please return all correspondence con	cerning this mat	ter to the following:			
JAMES GON	ZALEZ				
		Name of Contact Person	1		
AT PLUS CO	RP				
		Firm/ Company			
3650 NW 82N	3650 NW 82ND AVE SUITE 404				
Address					
DORAL, FL 3	33166				
		City/ State and Zip Code	2		
ATPLUS@LIVE.Co	OM				
E-mail ac	ldress: (to be us	ed for future annual report	notification)		
For further information concerning th	nis matter, pleas	e call:			
JAMES GONZALEZ		at (de & Daytime Telephone Number		
Name of Contact Pers	son	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following	amount made p	payable to the Florida Depa	rtment of State:		
	Filing Fce & ate 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)		
Mailing Address Amendment Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32	ations	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PLEASURE PLAY INVESTMENTS INC

(Name of Corporation	as currently filed with the Florida Dept. of State)
P17000017671	
(Documer	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corr	poration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the bbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	<u>ESS</u>)
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	ma z
D. If amending the registered agent and/or registered	
new registered agent and/or the new registered of	fice address:
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. La	tered Agent: am familiar with and accept the obligations of the position.
2.19 Loospy the appointment an regard on agent. The	
Signati	ure 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	LUIGI PELLECHIA	8265 NW 116TH AVE
Add Remove			DORAL, FL 33178
2) X Change	VP	MARIBEL CABRERA	8265 NW 116TH AVE
Add			DORAL, FL 33178
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

in amendment provides for an ex	xchange, reclassification, or cancellation of issued shares,
ovisions for implementing the ar	xchange, reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:
an amendment provides for an expositions for implementing the ar (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:
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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 the document's effective date on the	is block does not meet the applicable statutory filing requirements, this of Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	i(s)
	approved by the shareholders through voting groups. The following staten for each voting group entitled to vote separately on the amendment(s):	neni
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	31 !	
•	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sharehold	der
action was not required. APRIL Dated Signature (By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other control of the	
app	ointed fiduciary by that fiduciary)	
	ADRIANA Y GOMEZ SANZ	<u> </u>
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	