P1700074159

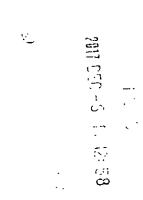
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DISTRIBUDORA	A RODRIGUEZ, INC
DOCUMENT NUMB	ER: P17000074159	
	of Amendment and fee are so	ubmitted for filing.
Please return all corres	pondence concerning this ma	atter to the following:
	ORLANDO J SILVA	
-	Name of Contact Person	
	MAS FINANCIAL GROUP	, INC
•	Firm/ Company	
	2853 EXECUTIVE PARK DRIVE STE 105	
-		Address
	WESTON, FL 33331	
-		City/ State and Zip Code
ojs@n	nasfinancialgroup.com	
	E-mail address: (to be u	sed for future annual report notification)
For further information	concerning this matter, pleas	se call:
ORLANDO J SILVA		at (954 873-9018
Name o	f Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Department 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 (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301

Articles of Amendment to Articles of Incorporation of

2017 DEC -6 PM 12: 58

DISTRIBUDORA RODRIGUEZ, INC.

DISTRIBUDORA RODRIGUEZ, INC	
(Name of Corporati	on as currently filed with the Florida Dept. of State)
P17000074159	,1
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:
DISTRIBUIDORA RODRIGUEZ, INC	The man
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the	The new a "corporation," "company," or "incorporated" or the abbreviation, ""Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
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 new registered agent and/or the new registered of New Registered Agent	ed office address in Florida, enter the name of the office address:
	(Florida street address)
V . D	
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Regi Thereby accept the appointment as registered agent.	, (iii, comp
Signe	sture 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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		.	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	_		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
·	
	
- -	
· · · · · · · · · · · · · · · · · · ·	
	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	A NOT COMPANIES IN THE AMERICAN RISER.

•	11/28/2017	
The date of each amendment(s) adoption:	, if other than th
date this document was signed.		
	11/28/2017	
Effective date <u>if applicable</u> : _		·—
	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirements, this de Department of State's records.	ate will not be listed as the
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 amendments e sufficient for approval.	(s)
	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	er
11/28/2	017	
DatedSignature	took or ronger	
(By	a director, president or other officer - if directors or officers have not been	
sele	ected, by an incorporator - if in the hands of a receiver, trustee, or other cou	rt .
арр	ointed fiduciary by that fiduciary)	
	JOEL A RODRIGUEZ	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	