## P18000084148

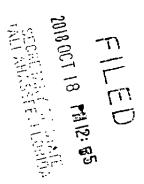
| (Requ                      | uestor's Name)  |             |
|----------------------------|-----------------|-------------|
| (Addr                      | ess)            |             |
| (Addr                      | ess)            |             |
| (City/                     | State/Zip/Phon  | e #)        |
| PICK-UP                    | ☐ WAIT          | MAIL        |
| (Busi                      | ness Entity Nar | ne)         |
| (Doct                      | ument Number)   |             |
| Certified Copies           | Certificate     | s of Status |
| Special Instructions to Fi | ling Officer:   |             |
|                            |                 |             |
|                            |                 |             |
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|                            |                 |             |

Office Use Only



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10/18/18--01041--024 \*\*35.00



Amend

OCT 2 6 2018
I ALBRITTON

## **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORPO          | DRATION: FEDACRI CORP                       |   |  |
|------------------------|---|---|--|
| DOCUMENT NUN           | D40000004440                                |   |  |
| The enclosed Article   | es of Amendment and fee are su              | bmitted for filing.   |  |
| Please return all corr | espondence concerning this ma               | tter to the following:  |  |
|                        | MARIA B VALLADARES                          |   |  |
|                        |   | Name of Contact Person  | 1  |
|                        |   | Firm/ Company   |  |
|                        | 6011 SW 93RD PLACE                          |   |  |
|                        |   | Address   |  |
|                        | MIAMI, FL 33173                             |   |  |
|                        |   | City/ State and Zip Cod   | e  |
| <del></del>            | E-mail address: (to be us                   | sed for future annual report                                      | notification)  |
| For further informati  | on concerning this matter, pleas            | se call:  |  |
|                        |   | at (  |  |
| Name                   | e of Contact Person                         | Area Co   | )de & Daytime Telephone Number   |
| Enclosed is a check t  | for the following amount made               | payable to the Florida Depa                                       | irtment of State:  |
| S35 Filing Fee         | □\$43.75 Filing Fee & Certificate of Status | □S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |

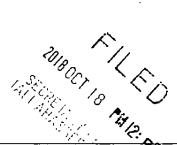
**Mailing Address** 

Amendment Section Division of 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 Articles of Incorporation



|  | 01                           | $A_{i}$                  | $\mathcal{E}_{\mathbb{Z}}$ . |
|--|------------------------------|--------------------------|------------------------------|
| FEDACRI CORP.  |                              | <b>?</b> ;               | Sec. We.                     |
| (Name o  | of Corporation as currently  | y filed with the Florida | Dept. of State               |
| P18000084148   |                              |                          | 197/Ja                       |
|  | (Document Number of          | Corporation (if known)   |                              |
| Pursuant to the provisions of section 607. its Articles of Incorporation:  | 1006, Florida Statutes, this | Florida Profit Corporati | ion adopts the following am  |
| A. If amending name, enter the new na  | ame of the corporation:      |                          |                              |
|  |                              |                          | The                          |
| name must be distinguishable and con<br>"Corp.," "Inc.," or Co.," or the design<br>word "chartered," "professional associa | ation "Corp," "Inc," or "    | Co". A professional co   | corporated" or the abbre     |
| B. Enter new principal office address,   | if applicable:               | 6011 SW 93RD PL          | ACE                          |
| (Principal office address MUST BE A STREET ADDRESS)  |                              | MIAMI, FL 33173          |                              |
| C. Enter new mailing address, if appli   |                              | 6011 SW 93RD PL          | ACE                          |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u> )   |                              | MIAMI, FL 33173          |                              |
| D. If amending the registered agent an<br>new registered agent and/or the new  |                              |                          | <u>e name of the</u>         |
|  |                              | _                        |                              |
| Name of New Registered Agent   | 6011 SW 93RD PLACE           | <del></del>              |                              |
|  | (Florida stre                | eet address)             |                              |
| New Registered Office Address:   | MIAMI                        |                          | , Florida                    |
|  |                              | (City)                   | (Zip Code,                   |
|  |                              | (/                       | tap con                      |

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and titl 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; Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter 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 to a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT 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> | Name                              | <u>Addres</u> s    |
| 1) X Change                | P<br>        | sergio javier flores sandoval     | 6011 SW 93RD PLACE |
| Add                        |              |                                   | MIAMI, FL 33173    |
| Remove                     |              |                                   |                    |
| 2) X Change                | <u> </u>     | maria dela luz augusta beltranena | 6011 SW 93RD PLACE |
| Add                        |              |                                   | MIAMI, FL 33173    |
| Remove                     |              |                                   |                    |
| 3 ) Change                 |              |                                   |                    |
| Add                        |              |                                   |                    |
| Remove                     |              |                                   |                    |
| 4) Change                  |              |                                   |                    |
| Add                        |              |                                   |                    |
| Remove                     |              |                                   | <del></del>        |
| 5) Change                  |              |                                   |                    |
| Add                        |              |                                   |                    |
| Remove                     |              |                                   |                    |

| If amending or adding additional Article (Attach additional sheets, if necessary). | (Be specific)  |
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|  | nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:   |
| (if not applicable, indicate N/A)  | and the second s |
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|  |  |
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| <del></del>  |  |

| The date of each amendment(s date this document was signed.               | ) adoption:, if   |
|---|---|
| Effective date if applicable:   |   |
|   | (no more than 90 days after amendment file date)  |
| <b>Note:</b> If the date inserted in the document's effective date on the | is block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.   |
| 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(s) e sufficient for approval.   |
|   | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):  |
| "The number of votes c  | 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 shareholder  |
| ☐ The amendment(s) was/were action was not required.                      | adopted by the incorporators without shareholder action and shareholder   |
| 10/16/2<br>Dated  | 2018  |
| Signature   | mbdt  |
| (By<br>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 court ointed fiduciary by that fiduciary) |
|   | Maria de la Luz Augusta Beltranena  |
|   | (Typed or printed name of person signing)   |
|   | Vice President  |
|   | (Title of person signing)   |