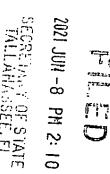
## P20 0000 14292

Office Use Only



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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: TWO GENERATION	ON INVESTMENTS INC				
	BER: P20000014292					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	SUGEHIN M RIERA					
	Name of Contact Person					
	NONA TAX INC					
	Firm/ Company					
	10783 NARCOOSSEE RD S	UITE #117				
	Address					
	ORLANDO FL 32832					
		City/ State and Zip Code	2			
	egalea@twogeneration.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	n concerning this matter, pleas	se call: at (at	. 990-1812			
Name of Contact Person		at ( Area Co	) de & Daytime Telephone Number			
	the following amount made					
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Ame Divi P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

## Articles of Amendment to Articles of Incorporation of

FILED

TWO GENERATION INVESTMENTS INC

(Name o	of Corporation as currently	filed with the Florida Dirot . If Stat	SD PM 2: 10
P20000014292		gerpetili.	Y OF STATE -
	(Document Number of	Corporation (if known) TALLAH	ASSEE, FL
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A	ompany," or "incorporated" or the al- professional corporation name mu	obreviation "Corp.," st contain the word
3. Enter new principal office address,	if applicable:		
Principal office address <u>MUST BE A S</u>	TREET ADDRESS )		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)			
			<del></del>
<ol> <li>If amending the registered agent an new registered agent and/or the new</li> </ol>			<u>-</u>
Name of New Registered Agent	NONA TAX INC	•	
Name of New Registered Agent	10783 NARCOOSSEE RD	SUITE #117	
	(Florida stre	ret address)	<del></del>
New Registered Office Address:	ORLANDO	. Florida	32832
New Negistered Office Mantess.	(	(City)	(Zip Code)
N D 14 14 (10) 4 15	tion to a produce of America		
New Registered Agent's Signature, if c hereby accept the appointment as regist			position.
	Que de	55N	
	Signature of New Re	gistered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Doc X Remove $\underline{V}$ Mike Jones SV<u>X</u> Add Sally Smith Type of Action Address Title <u>Name</u> (Check One) 11301 SOUTH ORANGE BT ESTRADA, OSCAR RAUL 1) \_\_\_\_ Change STE 205, ORLANDO FL 32837 \_\_\_ Add Remove GARCIA, YAQUELINE L 11301 SOUTH ORANGE BT T 2) \_\_\_\_ Change STE 205, ORLANDO FL 32837 Add Remove S BERNE GALEA, JOSE M 11301 SOUTH ORANGE BT Change STE 205, ORLANDO FL 32837 Add Remove 4) \_\_\_\_ Change \_\_\_ Add \_\_ Remove 5) \_\_\_\_ Change Add Remove 6) \_\_\_\_ Change \_\_\_ Add Remove

Attach additional sheets, if necessary). (Be specific)	
	<del></del>
<u> </u>	
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
_		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements. Department of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sharehol	der action and shareholder
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amer sufficient for approval.	ndment(s)
	pproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
(By a selec	director, president or other officer – if directors or officers have noted, by an incorporator – if in the hands of a receiver, trustee, or other officers by that fiduciary)  ELENA CAROLINA GALEA SUAREZ  (Typed or printed name of person signing)  PRESIDENT	
	(Title of person signing)	