Division of Corporations Electronic Filing Cover Sheet

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(((H100001836773)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : RICARDO BAJANDAS, P.A.

Account Number : 110263002111 Phone

: (305)377-0809

Fax Number

: (305)377-0781

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN TWO BUILDINGS CORPORATION

| Certificate of Status | 0 |
|-----------------------|---------|
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Corporate Filing Menu

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8/16/2010

JUL: 1.6:2010

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15.

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF COR | PORATION: | TWO BUILDINGS CORPORATION | |
|--|---|---|--|
| DOCUMENT N | UMBER: | P94000042547 | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | |
| Please return all c | orrespondence concern | ing this matter to the following: | |
| | CARLOS J. VILLANUEVA, ESQUIRE | | |
| | | Name of Contact Person | |
| VILLANUEVA, BAJANDAS & FITZGERALD, LLP | | | |
| | Firm/ Company | | |
| | 1000 BRICKELL AVENUE, SUITE 200 | | |
| | | Address | |
| | | MIAMI, FLORIDA 33131 | |
| | City/ State and Zip Code | | |
| | CARL | OS@VBFLAWYERS.COM | |
| | | be used for future annual report notification) | |
| For further inform | ation concerning this n | natter, please call: | |
| CARLOS J. | VILLANUEVA, ESQ | | |
| Name | e of Contact Person | Area Code & Daytime Telephone Number | |
| Enclosed is a chec | k for the following am | ount made payable to the Florida Department of State: | |
| ☐ \$35 Filing Fee | \$43.75 Filing Fee & Certificate of Statu | | |
| P.O. Box 6 | nt Section f Corporations | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | |

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产作是事

Articles of Amendment

to

10 ÁUG 16 PM 3: 06

Articles of Incorporation

SECRETARY OF STATE

| VI | PALLAHAGTEE PLORIDA |
|--|--|
| TWO BUILDINGS CORPORATION | LANCESTRUM ATTENDED ASSESSMENT OF THE PROPERTY |
| (Name of Corporation as currently filed with the Florida De | ept, of State) |
| P94000042547 | |
| (Document Number of Corporation (if known) | |
| ant to the provisions of section 607.1006, Florida Statutes, this <i>Florid</i> dment(s) to its Articles of Incorporation: | a Profit Corporation adopts the following |

Pursua amend A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address)

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.

(City)

Signature of New Registered Agent, if changing

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_, Florida__

(Zip Code)

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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)

| Title | <u>Name</u> | Address | Type of Action |
|----------|--|--|-----------------------------------|
| TREAS | ROBERTO CAYON | 3822 W 12 STREET HIALEAH, FL 33012 | ☐ Add ☐ Remove |
| | | | F |
| | | | |
| (anach a | dditional sheets, if necessary). (Be | specific) | |
| | | | |
| | | | |
| provisio | mendment provides for an exchang ons for implementing the amendme ot applicable, indicate N/A) | e, reclassification, or cancellation ant if not contained in the amends | of issued shares, nent itself: |
| | | | |
| | | | |
| | | | |

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| The date of each amendment(s) adoption: AUGUST 12, 2010 | | | | |
|---|---|--|--|--|
| | (date of adoption is required) | | | |
| Effective date if applicable: | nore than 90 days after amendment file date) | | | |
| { <i>no.</i> 7. | nore than 90 days after amenament file date) | | | |
| Adoption of Amendment(s) | (CHECK ONE) | | | |
| The amendment(s) was/were ado by the shareholders was/were sul | pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval. | | | |
| The amendment(s) was/were app must be separately provided for | roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): | | | |
| "The number of votes cast fo | or the amendment(s) was/were sufficient for approval | | | |
| by | | | | |
| (votin | ig group) | | | |
| The amendment(s) was/were ado action was not required. | pted by the board of directors without shareholder action and shareholder | | | |
| The amendment(s) was/were ado action was not required. | pted by the incorporators without shareholder action and shareholder | | | |
| Dated_8 | 13 10 | | | |
| Signature | m fachade | | | |
| (By a dire | ctor, president or other officer - if directors or officers have not been | | | |
| selected, by an incorporator - If in the hands of a receiver, trustee, or other court | | | | |
| appointed | fiduciary by that fiduciary) | | | |
| | CEFERINO MAChAdo (Typed or printed name of person signing) | | | |
| | (Typed or printed name of person signing) | | | |
| | President | | | |
| | (Title of person signing) | | | |