P9600038378

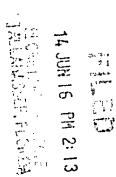
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JUN 2 7 2014 C. CARROTHERS

COVER LETTER

Division of Corporations
NAME OF CORPORATION: OCE O TRUESTMENTS INC DOCUMENT NUMBER: P96000038378
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tenesita Ocejo
OCE O INVESTMENTS, INC.
Tenesita Ocejo Name of Contact Person, Ocejo Investments Inc. Firm/Company 12980 NW 42 ND Ave. Writ#113 Address
Opg Locka Fla 33054 City State and Zip Code
E-mail address: (to be used for fugure annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tenes ita Oceso at 186 417-6515 Name of 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 Certificate of Status S35 Filing Fee & Certificate of Status
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to

Ai	rucies of incorporation	de la complete
OCE JO INU	est ments,	INC JUN 16 PM 2:13
(Name of Corporation as currently file	d with the Florida Dept. of St	ate) Section 1
P 96 0000	738378	TALLAILS, Et, F. COM
(Document Number of C	orporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	tatutes, this Florida Profit Cor	rporation adopts the following amendment(s)
A. If amending name, enter the new name of the corr	ooration:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A profession	or "incorporated" or the abbreviation nal corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	ESS)	0 MW 42 Ave
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	170	LOCKA, FC 33059, 80 MW 42M AVE
		17-74-113 LOCKA, FC. 33054
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		ter the name of the
Name of New Registered Agent		
1298	O W 42 M (Florida street address)	AUR UNITH/13
New Registered Office Address:	9 COCKA (City)	, Florida
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I d	ered Agent: im familiar with and accept the	obligations of the position.
Signature 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)

iI

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>	Name	Address
1) Change			
Add		·	
Remove			
2) Change			
Add		,	
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	· · · · · · · · · · · · · · · · · · ·		
Remove			

Attach <i>additiona</i>	dding additional Art sheets, if necessary).	(Be specific)		
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provisions for it	t provides for an exc mplementing the am	hange, reclassificat	ion, or cancellation ained in the amend	of issued shares, ment itself:
(if not appli	cable, indicate N/A)			
				
	· · · · · · · · · · · · · · · · · · ·			
			- 1 - 1 - 1	

The date of each amendment(s) adoption: date this document was signed.	, if other than th
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature Peresita Oujo	
(By a director, 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)	
TENNES ITH OCETO (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Parcinalt	

14 JUN 16 PH 2: 14

(Title of person signing)