

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
•
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400250670304

08/15/13--01013--008 **35.00

AUG 15 PH 12:00

AUG 20 2013 R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CAPRICE G						
DOCUMENT NUMBER: P96000083191						
The enclosed Articles of Amendment and fee are sub-	nitted for filing.					
Please return all correspondence concerning this matter	er to the following:					
MARGARITA GUI	rstein					
	Name of Contact Person					
CAPRICE GROUP	P, INC.					
	Firm/ Company					
11430 SW 103 ST	11430 SW 103 STREET					
	Address					
MIAMI, FLORIDA	33176					
	City/ State and Zip Code					
MIRON@CAPRICEG	ROUP.COM					
E-mail address: (to be use	d for future annual report	notification)				
For further information concerning this matter, please	call:					
Margarita Gutstein	at (305	595-9618				
Name of Contact Person		le & 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 & 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	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301				

Articles of Amendment to **Articles of Incorporation** of

FILED AUG 15 PM 12:00

CAPRICE GROUP, INC.

CAPRICE GROUP, INC.	AND THE SECOND CONTRACTOR
(Name of Corporation as currently filed with the Florida Pent	of State) A LANDA
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit</i> its Articles of Incorporation:	Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "compan "Corp" "Inc" or Co.," or the designation "Corp," "Inc," or "Co". A professional association," or the abbreviation "P.A."	y," or "incorporated" or the abbreviation essional corporation name must contain the
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 Florid new registered agent and/or the new registered office address: Name of New Registered Agent	a, enter the name of the
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and acce Signature of New Registered Agent, if changing Registered Agent.	· · · · · · · · · · · · · · · · · · ·

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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) X Change	PRESIDE	NT —	MARGARITA GUTSTEIN	11430 SW 103 STREET
Add				
Remove				
2) Change				
Add				
Remove				
3) Change		<u>. </u>		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				,,
Remove				
6) Change				
Add				
Remove				

tach additional sheets, if necessary). (E	Зе specific)				
				,	
				_	
				.	
				_	
			_		
			_		
			_		
f an amendment provides for an exchan	une reclassific	eation or ca	ncellation o	f issued shar	res.
provisions for implementing the amend	ment if not co	ontained in t	he amendm	ent itself:	<u></u>
(if not applicable, indicate N/A)					
		<u></u>			
	-				
		,			
				<u> </u>	

The date of each amendment(s) adoption: AUGUST 12, 2013	, if other than the
Effective date if applicable: AUGUST 12, 2013	
(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 AUGUST 12, 2013	
AUGUST 12, 2013 Signature	
(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)	_
MIRON GUTSTEIN	
(Typed or printed name of person signing)	
DIRECTOR	

(Title of person signing)