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Examiner's Initials



Document Number of Corporation

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following articles of amendment to its Articles of Incorporation:

FIRST: Amendment(s) adopted:

## ARTICLE VII - OFFICERS AND/OR DIRECTORS

Juliana Chala – DPS ..... DELETED

## ARTICLE IX – REGISTERED OFFICE AND AGENT

The name of the new registered office and agent of this Corporation is:

4,

Irene Pereira 4230 SW 5 Street Miami, Florida 33134

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows.

THIRD: The date of each amendment's adoption: <u>11/10/04</u>

FOURTH: Adoption of Amendment(s) (check one)

- $\mathbf{\nabla}$ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
- The amendment(s) was/were approved by the shareholder through voting groups.

The following statement must be separately for each voting group entitled to vote separately on each amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for (voting group) approval by

- The amendment(s) was/were adopted by the board of directors without  $\Box$ 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.

President or other officer if adopted by the shareholders) OR (By a director if adopted by the directors) OR (By an incorporator if adopted by the incorporators)

Juliana Chala Type or printed name

> <u>DPS</u> Title

Having been named registered agent to accept service of process for the above stated Corporation, at the place designated in this certificate, I hereby agree to act in the capacity and further agree to comply with the provisions of all statues relative to the proper and complete discharge of my duties.

Registered Agent Signature