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| Special Instructions to | Filing Officer: | |
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THE STREAM RODS

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C. LEWIS

APR 7 2014

EXAMINER

COVER LETTER .

TO: Amendment Section Division of Corporations

| | ATION: YOUR MA | | |
|--------------------------|--|--|--|
| DOCUMENT NUME | _{ER:} <u>P9800001401</u> | 8 | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | |
| Please return all corres | pondence concerning this ma | tter to the following: | |
| | Sofia Powell-Cos | io, Esq. | |
| • | | Name of Contact Person | 1 |
| | Sofia Powell-Cos | | |
| | 4000 0 144 0 1 4 | Firm/ Company | |
| | 1900 S.W. 3rd Av | | · |
| | . | Address | |
| | Miami, Florida 33 | | |
| | | City/ State and Zip Cod | e |
| sofi | apc@aol.com | | |
| | E-mail address: (to be us | sed for future annual report | notification) |
| For further information | concerning this matter, pleas | se call: | |
| Sofia Powell- | Cosio, Esq. | a ₁ (305 | 579-9988 |
| Name o | f Contact Person | | de & Daytime Telephone Number |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | urtment of State: |
| □ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Ame Divis P.O. | ing Address Indment Section Identification of Corporations Box 6327 hassee, FL 32314 | Amend Divisio Clifton 2661 E | Address Iment Section In of Corporations Building Executive Center Circle Eassee, FL 32301 |

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Articles of Amendment to Articles of Incorporation

14 MAR 31 PH 1: 46

YOUR MARKET, INC., a Florida corporation

SECRETARY OF STATE FALL AHASSEE, FLORIO?

| (Name of Company) | <u></u> | | SEE. PEURIUM |
|---|------------------------------------|--|----------------------|
| (Name of Corporation as currently : P98000014018 | mea with the Florida De | ept. of State) | |
| | 3.5 | | |
| (Document Number o | of Corporation (if known) | | |
| Pursuant to the provisions of section 607.1006, Floric ts Articles of Incorporation: | da Statutes, this <i>Florida P</i> | Profit Corporation adopts the foll | owing amendment(s) t |
| A. If amending name, enter the new name of the c | corporation: | | |
| | | | The new |
| name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the | p," "Inc," or "Co". A p | pany," or "incorporated" or t professional corporation name i | he abbreviation |
| 3. Enter new principal office address, if applicable | | | |
| Principal office address <u>MUST BE A STREET AD</u> | DRESS) | | |
| | | | |
| | | | |
| C. Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE Be | <u>OX</u>) | | |
| | | | |
| | | | |
| | | | |
| D. If amending the registered agent and/or registened new registered agent and/or the new registered | | orida, enter the name of the | |
| · · · · · · · · · · · · · · · · · · · | ornee address. | | |
| Name of New Registered Agent | | | |
| | | | |
| | (Florida street addres: | s) | |
| New Registered Office Address: | | , Florida | |
| | (City) | (Zip Cod | e) |
| | | | |
| | | | |
| New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent. | | accept the obligations of the posi- | tion. |
| co, accept the appointment as registered agent. | - with joint time to the to | coopt me doinganone of the poon | |
| | New Praistered Agent if c | t | |
| Signatura of A | ννω κραινιστρα Δαρνί τι Δ | TO THE COURT | |

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 Doe | |
|----------------------------|------------------|---------------------------|----------------------|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>SV</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | D/P | Juan Mirenna | 1900 S.W. 3rd Avenue |
| Add | | | Miami, Florida 33129 |
| Remove | | | |
| 2) Change | DVPS | Pablo M. Mirenna | 1900 S.W. 3rd Avenue |
| Add | | | Miami, Florida 33129 |
| Remove | | | |
| 3) Change | D | Angelica M. G. De Mirenna | 1900 S.W. 3rd Avenue |
| Add | | | Miami, Florida 33129 |
| Remove | | | |
| 4) Change | D/T | Fernando C. Mirenna | 1900 S.W. 3rd Avenue |
| Add | | | Miami, Florida 33129 |
| Remove | | | |
| 5) Change | D/P/S | Sofia Powell-Cosio | 1900 S.W. 3rd Avenue |
| Add | | | Miami, Florida 33129 |
| Remove | | | |
| , D | | | |
| 6) L Change | | | |
| Add | | | |
| Remove | | | |

| ttach additional sheets, if necessary). | ticles, enter change(s) here: (Be specific) |
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| an amendment provides for an exch | hange, reclassification, or cancellation of issued shares, |
| rovisions for implementing the ame | endment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | |
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| The date of each amendmen | t(s) adoption. December 2 | SECRETARY OF STATE | , if other than the |
|--|---|---|---------------------|
| date this document was signed | l. | SECRETARY OF STAIL | , |
| Effective date if applicable: | December 27, 2013 | SECRETARY OF STATE TALL AHASSEE, FLORIDA | |
| | (no more th | ran 90 days after amendment file date) | |
| | | | |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | | |
| | re adopted by the shareholders. ere sufficient for approval. | . The number of votes cast for the amendment(s) | |
| | | rs through voting groups. The following statement ed to vote separately on the amendment(s): | |
| "The number of vote | s cast for the amendment(s) was | s/were sufficient for approval | |
| by | (voting group) | 25 | |
| | (voting group) | | |
| The amendment(s) was/we action was not required. | re adopted by the board of direc | ectors without shareholder action and shareholder | |
| The amendment(s) was/we action was not required. | re adopted by the incorporators | s without shareholder action and shareholder | |
| Dated_Dec | cember 27, 2013 | <u></u> | |
| Signature _ | Bara Pa | ruell - Cosio | |
| S | | r officer – if directors or officers have not been in the hands of a receiver, trustee, or other court ciary) | |
| | SOFIA I | Powe//- Cosio d or printed name of person signing) | |
| | | | |
| | PRO | es/Sec (Title of person signing) | |
| | | (Title of person signing) | |