Division of Corporations

# P990000338/

## Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

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From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number

072450003255

Phone

(305) 541-3694

Fax Number

(305)541-3034

OF STATE E, FLORIDA

## **BASIC AMENDMENT**

"KNOW YOUR CUSTOMER" INVESTIGATIONS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$43.75

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#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 13, 1999

"KNOW YOUR CUSTOMER" INVESTIGATIONS, INC. 1221 BRICKELL AVE., 9TH FLOOR MIAMI, FL 33131

SUBJECT: "KNOW YOUR CUSTOMER" INVESTIGATIONS, INC.

REF: P99000003381

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

The amendment must be signed by an incorporator if adopted by the incorporators or by a director if adopted by the directors.

The fax audit number shown on the last page of the document is incorrect. Also, the new name of the corporation shown on this same page differs from the new name shown in Article I of the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6906.

Darlene Connell Corporate Specialist FAX Aud. #: H99000016787 Letter Number: 499A00036083



# FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 12, 1999

"KNOW YOUR CUSTOMER" INVESTIGATIONS, INC. 1221 BRICKELL AVE., 9TH FLOOR MIAMI, FL 33131

SUBJECT: "KNOW YOUR CUSTOMER" INVESTIGATIONS, INC.

REF: P99000003381

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The amendment must be signed by an incorporator if adopted by the incorporators or by a director if adopted by the directors.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6906.

Darlene Connell Corporate Specialist

P.01/04

FAX Aud. #: H99000016787 Letter Number: 499A00035683



# ARTICLES OF AMENDMENT ARTICLES OF INCORPORATION

"KNOW YOUR	CUSTOMER FAUESTILATIONS, FUC.	
KIND O TOOK	(present name)	_

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)

ARTICLE I: CORPORATE NAME:

PEW NAME: OMEGA THUESTIGATION, THE.
ARTICLE III: PRINCIPAL OFFICE:
NEW PRINCIPAL OFFICE: 7620 NW 25 St., NO. 10, MIAMI, FL 33122 HEW NAME

PRTICIE VI: REGISTERED AGENT OPPICE:
NEW ADOLLSS OF OFFICE & REGISTERED AGENT:

DANIEL DIAZdeh RochA. CA 7620 NW 25 ST., NO. 10

MIAMI, FL. 33122

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:\_

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FOU	JRTH: Adoption of Amendment(s) (CHECK ONE)					
	The amendment(s) was/were approved by the shareholders. The number of th					
	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					
囚	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.					
	Signature  (By the Chairman or Vice Chairman of the Board of Directors, 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)					
	DANIEL DIAZ DE LA Rocha, CPA Typed or printed name					
	DIRECTOR Title					

.; .; ,;

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

First that KNOW YOUR C	istomer "Investigati	ons . Inc.
First that KNOW YOUR CON (N) desiring to organize under the	ame of Corporation)	of France
		(
with its principal office, incorporation has named	MAJER MAY DE AW	ICOCONTY OT
<b>3</b> /35 1615/	(Name of Registere	d Agent)
located at 7620 NG 2	3 21. 10. 10	
City of MIAM	County of	DADE
(City)		(County)
State of Florida, as its agent	to accept service o	f process within

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Registered Agent

H99000016787

this sate.