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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: BAIRES CORP.				
DOCUMENT NUMBER: P99000037899				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
CHRISTIAM CARDENAS				
Name of Contact Person				
LOUIS A. SUPRASKI, P.A.				
Firm/ Company				
2450 NE MIAMI GARDENS DR. 2ND FLOOR				
Address MIAMI, FL 33180				
City/ State and Zip Code				
MARCETEN@GMAIL.COM E-mail address: (to be used for future annual report notification)				
E-man address. (to be used for fature annual report notification)				
For further information concerning this matter, please call:				
LOUIS A. SUPRASKI at (305) 792-0060				
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:				
Sas Filing Fee Certificate of Status (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee FL 32301				

13 OCT 28 PM 2158

Articles of Amendment to Articles of Incorporation of

BAIRES CORP.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P99000037899	
(Document Number of Corporation (if known)	<u> </u>
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the feits Articles of Incorporation:	ollowing amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name word "chartered," "professional association," or the abbreviation "P.A."	the abbreviation 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 Florida, enter the name of the new registered agent and/or the new registered of fice address:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:, Florida	
(City) (Zip Co	ode)
New Registered Agent's Signature, if changing Registered Agent; I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the pos	sition.
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)

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: XChange	PI	John Doe	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	D	JOSE TENENBAUM	
Add			
Remove			
2) Change	D	LEON TENENBAUM	
Add			
Remove 3) Change	VD	German A. Previsdomini	
Add			
Remove			***************************************
4) Change	SD	Viviana E. Tenenbaum	
Add			
Remove			
5) Change	D	GRACIELA FANDINO	
Add			
√ Remove			
6) Change			
Add			
Remove			

I <u>f amei</u> Attach	ding or adding additional sheets, if ned	onal Articles, enter essary). (Be speci	change(s) here:		
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lf an ai provii (i)	nendment provides fo ions for implementing not applicable, indicat	an exchange, recli the amendment if i	assification, or c not contained in	ancellation of issued the amendment itsel	shares. L
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			<u>.</u>		

The date of each amendment(s) ad date this document was signed.	loption:	, if other than the
•		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated OCTOB	ER 23, 2013	
Signature	Sell like	
(By a di	rector, president or other officer - if directors or officers have not been	
	i, by an incorporator - if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
••	GUSTAVO M. TENENBAUM	
	(Typed or printed name of person signing)	
	PRESIDENT/DIRECTOR	
•	(Title of person signing)	