581039

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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations						
NAME OF CORPORATION: NHE, INC.						
	DOCUMENT NUMBER: S87039					
		1 10 00				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this mat	tter to the following:				
	JULIO C JIMENEZ					
		Name of Contact Person	1			
	NHE, INC.					
		Firm/ Company				
-	3162 COMMODO		C & 1H			
		Address				
	MIAMI, FLORIDA	 				
		City/ State and Zip Code	2			
JU	LIOCL@EARTHL	INK.NET				
	E-mail address: (to be us	sed for future annual report	notification)			
For further information concerning this matter, please call:						
JULIO C JIM	IENEZ	at (305	, 448-5333 X-110			
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:						
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$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 Street Address						
Amendment Section Division of Corporations		Amendment Section Division of Corporations				

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

NHE, INC.

(Name of Corporation as	currently filed with the Flor	rida Dept. of State)		_
S87039				
(Documer	nt Number of Corporation (if k	nown)		-
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Fl	orida Profit Corporation a	adopts the following	ng amendment(s) to
A. If amending name, enter the new na	me of the corporation:			
name must be distinguishable and com "Corp" "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co	". A professional corpor	orated" or the a	_The new abbreviation contain the
B. Enter new principal office address, (Principal office address MUST BE A S				-
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of			2014 JUN 1 1	- - - -
D. If amending the registered agent an	d/or registered office addres	s in Florida, enter the na	T 17	
new registered agent and/or the nev	v registered office address: JULIO C JIMENE	7		•
Name of New Registered Agent	-		P	
	3162 COMMODORE		_	
New Registered Office Address:	(Florida street		33133 (Zip Code)	_
	(City)		(Zip Code)	-
New Registered Agent's Signature, if cl I hereby accept the appointment as regist Signature.	hanging Registered Agent: ered agent. I am familiar wit O Caracteristics gnature of New Registered Ag	Juneney	ns of the position. _	

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 D	<u>oe</u>		
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally S	<u>mith</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		Address
1) Change	DPT	• 	CLETO C MEIRELES		3162 COMMODORE PLZ
Add					# 3A
Remove					MIAMI, FLORIDA 33133
2) Change	VD		CLAUDIA M MEIRELE	S	3162 COMMODORE PLZ
Add					# 1C & 1H
Remove					MIAMI, FLORIDA 33133
3) Change	V	_	PAULO C MEIRELES		3162 COMMODORE PLZ
Add					# 1C & 1H
Remove					MIAMI, FLORIDA 33133
4) Change	PVD		MARCIO C PERDIGAC)	3162 COMMODORE PLZ
Add					# 1C & 1H
Remove					MIAMI, FLORIDA 33133
5) Change	TS		JULIO C JIMENEZ		3162 COMMODORE PLZ
Add					# 1C & 1H
Remove					MIAMI, FLORIDA 33133
6) Change	/				,
Add	7				
Remove					

ttach additional shee	g additional Articles, ts, if necessary) (Be	specific)	 ,	
				· · · · · · · · · · · · · · · · · · ·
				/A
		/	<u> </u>	
		/_		
			 	
/				
f an amendment nro	vides for an exchange	reclassification.	or cancellation o	fissued shares
provisions for imple	menting the amendme	ent if not contain	ed in the amendm	ent itself:
(if not applicable	. indicate N/A)			
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The date of each amendmen date this document was signed	t(s) adoption: JUNE 2, 2014	, if other than the
Effective date if applicable:	JUNE 2, 2014	
Effective date in applicable.	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
	NE 2, 2014	
Signature _	Manuste laid Wed	
S	By a director, president or other officer — if directors or officers have not been elected, by an incorporator — if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	MARCIO C. PERDIGAO	
	(Typed or printed name of person signing)	_
	PVD	
	(Title of person signing)	