

P03000057800

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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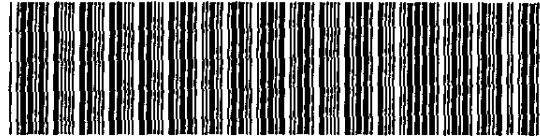
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TREASURER
AMBASSADOR

04 OCT 25 PM 4: 04

FILED

g. J. Mendonca
11/03/04
DC

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: TROPICAL FLOWERS ENTERPRISES, INC.

DOCUMENT NUMBER: P03000057800

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

AMARILYS D. GOMEZ
(Name of Contact Person)

TROPICAL FLOWERS ENTERPRISES, INC.
(Firm/ Company)

3300 EAST 4th AVENUE #4
(Address)

HIALEAH, FL 33013
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

AMARILYS D. GOMEZ at (305) 883-0093
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Articles of Amendment

to

Articles of Incorporation
of

TROPICAL FLOWERS ENTERPRISES, INC.

(Name of corporation as currently filed with the Florida Dept. of State)

P03000057800

(Document number of corporation (if known))

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 OCT 25 PM 4:04

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

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

ARTICLE VI (AMENDED) :

Tropical Flowers Enterprises, Inc., shall have two (2) directors,
and the number of directors may be changed as provided in the
bylaws, but shall never be less than two. The names and addresses
of the new elected directors are:

AMARILYS D. GOMEZ

PRESIDENT/TREASURER

JORGE G. QUIRANTES

VICE-PRESIDENT/SECRETARY

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: OCTOBER 19th, 2004

Effective date if applicable: OCTOBER 19th, 2004
(no more than 90 days after amendment file date)

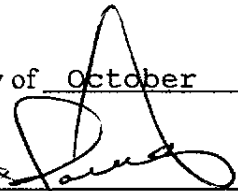
Adoption of Amendment(s) **(CHECK ONE)**

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

- 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.

Signed this 19th day of October, 2004.

Signature 

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

AMARILYS D. GOMEZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE: \$35