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(Re	questor's Name)	
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### **COVER LETTER**

TO: Amendment Section  Division of Corporations
NAME OF CORPORATION: J.O.N.A.F. Inc.
DOCUMENT NUMBER: 609000131737
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ANTHONY MACKS  Name of Contact Person  BIN 60 ZONE  Firm/ Company
8354 S.W. 40 S.T.  Address  Miami, FL 33155  City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Anthony make S at (305) 329-1999  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 & \$\$2.50 Filing Fee & Certificate of Status (Additional copy is enclosed)  \$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

#### **Articles of Amendment**

to

#### **Articles of Incorporation**

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

G 0900 | 31737

(Document Number of Corporation (if known)

11 JUN 15 AM 9:

SECRETARY OF STATE

TALLAHASSEE, FLORIS

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

A. If amending name, enter the new name	The new
abbreviation "Corp.," "Inc.," or Co.," or	in the word "corporation," "company," or "incorporated" or the the the designation "Corp," "Inc," or "Co". A professional corporation "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if (Principal office address MUST BE A STI	
C. Enter new mailing address, if application (Mailing address MAY BE A POST O	
D. If amending the registered agent and new registered agent and/or the new	or registered office address in Florida, enter the name of the registered office address:
Name of New Registered Agent.	DAVID FERNANDEZ 8354 SW. 40 ST
New Registered Office Address:	(Florida street address)  Miami , Florida FL 33159  (City) (Zip Code)
New Registered Agent's Signature, if cha I hereby accept the appointment as register	red agent. I am familiar with and accept the obligations of the position.  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) Type of Action Address **Title** <u>Namė</u> 15285 SN IOT LAME [ Add president Jorge Ospina Remove president David Fernandez 15285 Su 107 1 AME & Add MIAMI ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. 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: (if not applicable, indicate N/A)

The date of each amendment(s) a	doption:
Effective date if applicable:	(date of adoption is required)
(no	more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad by the shareholders was/were so	lopted by the shareholders. The number of votes cast for the amendment(s ufficient for approval.
	oproved by the shareholders through voting groups. The following statemer each voting group entitled to vote separately on the amendment(s):
_	for the amendment(s) was/were sufficient for approval
by(vol	ling group) "
<u> </u>	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ad action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated	0/13/11
Signature	Auge Ora-
selected	trector, president or other officer — if directors or officers have not been by an incorporator — if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	JORIGE OF PINA  (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	PRESIDENT
<u> </u>	(Title of person signing)