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(((H10000240862 3)))



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COR AMND/RESTATE/CORRECT OR O/D RESIGN HABANA HOME'S INC.

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Electronic Filing Menu

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Help

11/4/2010 3:27:09 PM PAGE 1/001 Fax Server

November 4, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

HARANA HOME'S INC. 9333 S.W. 37 STREET MIAMI, FL 33165US

SUBJECT: HABANA HOME'S INC.

REF: P10000041691

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.

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

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Teresa Brown Regulatory Specialist II FAX Aud. #: H10000240862 Letter Number: 210A00026028

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10 NOV -4 AM 8: 11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment Articles of Incorporation of

FILED 2010 NOV-4 AM 10: 19 A

LIADANIA L	HOME'S INC.	TALLAHASSTOF	STATE
(Name of Corporation as currently		TALLAHASSEE, F	LORIO
	0041691		
	of Corporation (if kno	own)	
Pursuant to the provisions of section 607,1006, F amendment(s) to its Articles of Incorporation:	lorida Statutes, this F	Florida Profit Corporation adopts the follo	owing
A. If amending name, cuter the new name of the	ecorporation:		
MORALES PAINTI			
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the des name must contain the word "chartered." "profess	word "corporation," signation "Corp," "Inc tonal association," or	"company," or "incorporated" or the c," or "Co". A professional corporation the abbreviation "P.A."	•
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	ble: DDRESS)		
		· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)		
D. <u>If amending the registered agent and/or regis</u>		în Florida, enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:	(Florida street t	address)	
<u> </u>	(City)	, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Is I hereby accept the appointment as registered agen	Registered Agent: t. I am familiar with a	and accept the obligations of the position.	

Signature of New Registered Agent, if changing

It 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) <u>Title</u> Name Address Type of Action ☐ Add ☐ Remove DbA 🗆 ☐ Remove ☐ 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) adoption: November 04, 2010
 Effective date <u>if applicable</u> :	(date of adoption is required) November 03, 2010
<u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK QNE)
The amendment(s) was/weby the shareholders was/web	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statemend 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	, 20
· · · · · · · · · · · · · · · · · · ·	(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.	re adopted by the incorporators without shareholder action and shareholder
Dated_NO	VEMBER 04, 2010
Signature _	
sele	a director, president or other officer – if directors or officers have not been coted, by an incorporator – if in the hands of a receiver, trustee, or other court of inted fiduciary by that fiduciary)
	OSMAY MORALES
	(Typed or printed name of person signing)
	DIRECTOR/PRESIDENT
,	(Trile of person signing)