## P11000069568

(Re	equestor's Name)	
(Ad	idress)	
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(Cit	ty/State/Zip/Phon	e #)
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02/03/12--01008--013 \*\*35.00

Amend

12 FEB -3 PH 1:5

FEB 0 3 2012 T. ROBERTS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: ARTECH 3	804, INC.	
DOCUMENT NUM	BER: P1100006956		
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	ANGEL D. CORI		
		Name of Contact Perso	n
	ANGEL D. CORI		
	700 NINA 40 AND	Firm/ Company	
	782 N.W. 42 AVE		
	MIAMI, FL 3312	Address	
	IVIIAIVII, FE 3312	City/ State and Zip Cod	<u> </u>
		•	
AL	INA@ACORDOV		
	E-mail address: (to be u	sed for future annual report	noutication)
For further informatio	n concerning this matter, plea	se call:	<i></i>
ANGEL D. C	ORDOVA	at ( 305	444-5511
Name	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy
	enclosed)	(Additional C	Copy is enclosed)
			, is cholosed)
Ame Divi P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations a Building Executive Center Circle assee, FL 32301

## **Articles of Amendment** to **Articles of Incorporation** of

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.12	FEE	}- <u>3</u>	PH	1:59

ARTECH 304, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) P11000069568

(Document Number of Corporation (if known)

endment(s) to

	NA	2
me must be distinguishable and contain the word "corp" "orp.," "Inc.," or Co.," or the designation "Corp," "Inc, rd "chartered," "professional association," or the abbrevi	poration," "company," or "incorporated" ," or "Co". A professional corporation no	or the abb
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS	, <u>NA</u>	
Enter new mailing address, if applicable:	./ 0.	
(Mailing address MAY BE A POST OFFICE BOX)	<u> DIP</u>	
	D IP	
(Mailing address <u>MAY BE A POST OFFICE BOX)</u> If amending the registered agent and/or registered office.	ce address in Florida, enter the name of th	e
(Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office.	ce address in Florida, enter the name of the address:	<u>e</u>
(Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office a   Name of New Registered Agent   (Flo	ce address in Florida, enter the name of the address:  When the control of the co	<u>e</u>

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 <math>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> <u>J</u>	John Doe	
X Remove		Mike Jones	
X Add		Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change X Add Remove	<u>PS</u>	HECTOR M. RENNELLA	PORTAL NOU 29 BAJO B BARCELONA, SPAIN 08003
2) Change Add Remove			
3 ) Change Add Remove			
4) Change Add Remove	<u></u>		·
5) Change Add Remove			
6) Change Add Remove			

attach additional sheets, if necessary).	cles, enter chang (Be specific)	NA		
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f an amendment provides for an exch	ange, reclassifica	tion, or cancellatio	of issued shares	1
provisions for implementing the amer (if not applicable, indicate N/A)	iument it not con	tamed in the amen	ament asen:	
	NA			
			<del></del>	
				-
				**

The date of each amendment(s	1-25-12
,	02/01/2012
Effective date if applicable:	(no more than 90 days after amendment file date)
	(2007)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	east for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
<sub>Dated</sub> 01/2	5/2012
a:	
selo	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	RAUL RENNELLA
	. (Typed or printed name of person signing)
	DIRECTOR
	(Title of person signing)