P15000059185

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
ī		
		:





400277207434

09/21/15--01034--014 **35.00

2815 SEP 21 AM 9: 15

SECRETARY BY STATE
STORM BY CHARLESTATE

SEP 25 2015

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

	NATION: F&5 Deve					
DOCUMENT NUME	er: <u>\$1500005</u>	9185				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	Lou	Janni Cesari	0			
	·	Name of Contact Person				
	Cesar	TO P.A.				
		Firm/ Company				
	800 V	Brickell Ave . s	suite 1105			
		Brickell Ave s				
	_ Miami	FL 33131 City/ State and Zip Cod				
	,	City/ State and Zip Cod	e			
	E-mail address: (to be us	O @ De Zeniem e and for future annual report	sociedos. com notification)			
For further information	n concerning this matter, pleas	se call:				
Louann	i cesento	at (_305_	, 251-0069			
Name o	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	r 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 enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mai	Mailing Address Street Address					

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

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ONTENE 2115 SEP	ATTACKED WORKSTATE 21
	Aly 9: 19
te)	5.79

tly filed with the Florida Dept. of State)
ly med with the Florida Dept. of State)
of Corporation (if known)
Florida Profit Corporation adopts the following amendment
The new
on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
104 Crandon Blvd.
Suite 304-A, Key Biscoyne
Florida, 33131
104 Crandon Blvd.
Suite 304-A, Kay Biscayne
Florida, 33131
iress in Florida, enter the name of the
treet address)
···
, Florida
1

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, no	ame, 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change	PT	John De	OC .	
X Remove	Y	Mike Je	ones	
_X Add	SY	Sally Sr	mith	
Type of Action (Check One)	Title		Name	Address
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
_		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

	ij medessar jiji	(Be specific)				
			<u>.</u> .			
						-
·						
			·			
			· • · · · •			
				<u></u>	, "	
				•		
f an amendment provice provisions for implement (if not applicable, in	enting the amer	ange, reclassific adment if not co	ation, or cancel ntained in the a	ation of issued s mendment itself	hares. i	
provisions for impleme	enting the amer	ange, reclassific adment if not co	ation, or cancel ntained in the a	ation of issued s mendment itself	hares. i	
provisions for impleme	enting the amer	ange, reclassific adment if not co	ation, or cancel ntained in the a	lation of issued s mendment itself	hares.	
provisions for impleme	enting the amer	ange, reclassific adment if not co	ation, or cancel ntained in the a	ation of issued s mendment itself	hares.	
provisions for impleme	enting the amer	ange, reclassific adment if not co	ation, or cancel ntained in the a	ation of issued s mendment itself	hares.	
if an amendment provice provisions for implement (if not applicable, in	enting the amer	ange, reclassific adment if not co	ation, or cancel ntained in the a	ation of issued s mendment itself	hares.	

		TORSTON - NOTE & STORY TORSTON NOTE AND ADMINISTRATION OF THE PROPERTY OF THE
	The state of the s	****
The date of each amendment(s) addate this document was signed.	loption:	if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not partment of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were sal	pted by the shareholders. The number of votes east for the amendment(s) Ticlent for approval.	
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cust i	or the amendment(s) was/were sufficient for approval	
by	· ta	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
action was not required.	oted by the incorporators without shareholder notion and shareholder	
Dated 0.9/1	0/2015	
 .		
selected	rector, president or other officer - N directors or officers have not been a, by an incorporator - if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
_	Sebastian Velasco Navarro	
•	(Typed or printed name of person signing)	
	General Manager	
	(Title of person signing)	