# 527778

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE

APPRUVEU AND FILED

C. LEWIS
NOV 25 2013
EXAMINER



### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 8, 2013

MARIA FERNANDA BENITEZ / BARDAN INTERNATIONAL INC 520 BRICKELL KEY DR #0-305 MIAMI, FL 33131

SUBJECT: BARDAN INTERNATIONAL, INC.

Ref. Number: 527778

We have received your document for BARDAN INTERNATIONAL, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You need to fill out the amendment form. You can't change the officers on this change of agent form.

We are enclosing the proper form(s) with instructions for your convenience.

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

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 813A00026018

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Bardan International, Inc.  Name of Corporation
DOCUMENT NUMBER: 52777-8
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Maria Fernanda Benitcz Name of Contact Person
Bardan Intil.
520 Brckell Key Drive # 0-305
Miam, FL 33131 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For farther information concerning this matter, please call:
Vilma BenitC7 at (305) 3749767  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

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

Street Address:
Amendment Section
Division of Corporations
Cliffon Building
2661 Executive Center Circle
Tallahassee, FL 32301

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: BARDAN I	NTERNATIONA	L, INC.
DOCUMENT NUMBER: 527778		,
The enclosed Articles of Amendment and fee are su	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
MARIA FERNAN	IDA BENITEZ	
-	Name of Contact Person	n
BARDAN INTER	NATIONAL INC	
	Firm/ Company	
520 BRICKELL K	KEY DR #0-305	
· ·	Address	
MIAMI, FL 33131		
<del></del>	City/ State and Zip Cod	e
MFBENITEZ@BARI	DANCINEMA.CO	DM .
E-mail address: (to be u	sed for future annual report	notification)
For further information concerning this matter, plea	se call:	
VILMA BENITEZ	<sub>at (</sub> 305	374-9767
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee \$\text{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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

# APPROVED AND FILED

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

13 NOV 22 AM II: 00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

BARDAN INTERNATIO	NAL, INC.		WEE/WWO	CLIFTERNIDA
(Name of Corporation as	s currently filed with the Flo	rida Dept. of State)		•
527778				
(Documer	nt Number of Corporation (if k	inown)		•
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this Fl	orida Profit Corporation a	dopts the following	g amendment(s) t
A. If amending name, enter the new na	ame of the corporation:			•
•				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co	o". A professional corpor		
B. Enter new principal office address,	if applicable:			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )			
•				•
				•
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	icable: OFFICE BOX)			
	<del></del>			•
· ,				•
D. If amending the registered agent an new registered agent and/or the new	d/or registered office addres w registered office address:	s in Florida, enter the na	me of the	
Name of New Registered Agent	MARIA F. BENIT	EZ		
	520 BRICKELL K	(EY DR, #O-305	_ , 	
	(Florida stree		-	
New Registered Office Address:	MIAMI	. Florida	33131	
	(City)		(Zip Code)	•
New Registered Agent's Signature, if c	hanging Registered Agent:			
I hereby accept the appointment as regist	ered agent. I am familiar mit	h and accept the obligation	ns of the position.	
Si	gnature of New Registered Ag	ent, if changing	_	
	Sharing of right helphareurig	on, o 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)

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 Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT Jol	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	DANIEL B. BENITEZ	520 BRICKELL KEY DR.
Add			#0-305
Remove			MIAMI, FL 33131
2) Change	P	VILMA BENITEZ	520 BRICKELL KEY DR
Add			#0-305
Remove			MIAMI, FL 33131
3) Change	ST	MARIA F. BENITEZ	520 BRICKELL KEY DR
Add			#0-305
			MIAMI, FL 33131
4) Change	VP .	DANIEL A. BENITEZ	520 BRICKELL KEY DR
Add		•	#0-305
Remove			MIAMI, FL 33131
5) Change			
Add			
Remove			
6) Change			_
Add			· · · · · · · · · · · · · · · · · · ·
Remove			

	cles, enter change(s) here (Be specific)		
•			
		· <del></del>	
		- <del></del>	
			<del></del>
		· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exch	ange, reclassification, or o	ancellation of issued	hares.
provisions for implementing the amer	ange, reclassification, or contained in	ancellation of issued s the amendment itself	<u>hares.</u> :
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or condensed in	ancellation of issued the amendment itself	hares, <u>:</u>
provisions for implementing the amer	ange, reclassification, or conduction or conduction in	ancellation of issued s the amendment itself	hares,
provisions for implementing the amer	ange, reclassification, or condensed in	ancellation of issued s the amendment itself	hares,
provisions for implementing the amer	ange, reclassification, or condensed in	ancellation of issued s the amendment itself	hares,
provisions for implementing the amer	ange, reclassification, or on the second sec	ancellation of issued s the amendment itself	hares.
provisions for implementing the amer	ange, reclassification, or onder the second	ancellation of issued s the amendment itself	hares,
provisions for implementing the amer	ange, reclassification, or onderent if not contained in	ancellation of issued s the amendment itself	hares,
provisions for implementing the amer	ange, reclassification, or onderent if not contained in	ancellation of issued of the amendment itself	hares,
provisions for implementing the amer	ange, reclassification, or on an anger in a second in	ancellation of issued s the amendment itself	hares,
provisions for implementing the amer	ange, reclassification, or onder the second	ancellation of issued state amendment itself	hares,

# APPROVEU A**N**D FILED

Adoption of Amendment(s)  Adoption of Amendment(s)  CHECK ONE  SECRETARY OF STATE  (no more than 90 days after amendment file date)  (CHECK ONE)  The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s)  By the shareholders was/were sufficient for approval.	
Adoption of Amendment(s)  (CHECK ONE)  The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s)	
The amendment(s) was/were adopted 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	
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.	
Dated ///18/13	
Signature 1 Vipus Beulez, gresilent	
(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)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	