455306

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	#)
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(Document Number)		
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SECRETARY OF STATE IN SIGN OF CORPORATION



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 13, 2009

SERGIO E. OCHOA MIAMI R.Y.O. EXPORT, INC. 6331 NW 87 AVE MIAMI, FL 33178

SUBJECT: MIAMI R.Y.O. EXPORT, INC.

Ref. Number: 455306

We have received your document for MIAMI R.Y.O. EXPORT, 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):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

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) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 209A00012271

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COVER LETTER

Amendment Section Division of Corporations

SUBJECT: MIAMI R.Y.C.	EXDORT INC	
Na (Na	me of Corporation)	
DOCUMENT NUMBER: 4553	806	
The enclosed Articles of Correction and fee	are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
SERGIO F. OCHOA (Name of Contact Person)		
(Name of Contact Person)		
MIAMI RYO. EXPORT INC		
6331 NW B7 Ave (Address)		
Mrami FC 33	178	
(City/State and Zip Code) For further information concerning this matter, please call:		
SENGIO E OCHOA at (305) S929920 (Name of Contact Person) (Area Code & Daytime Telephone Number)		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amou	nt:	
\$35.00 Filing Fee	\$43.75 Filing Fee & Certificate of Status	
\$43.75 Filing Fee & Certified Copy	\$52.50 Filing Fee, Certificate of Status & Certified Copy	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	
	Tallahassee, FL 32301	

COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: lawi For further information concerning this matter, please call: Sagro E Desha Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$43.75 Filing Fee & ■\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section **Amendment Section Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



M(AM(R.4.0. Expert 1uc.

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

455306

(Document Number of Corporation (if known)

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

The new name must be distinguishable and contain the "incorporated" or the abbreviation "Corp.," "Inc.," or Co., "Co". A professional corporation name must contain association," or the abbreviation "P.A."	" or the designation "Corp," "Inc," o
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:		
Name of New Registered Agent:		
New Registered Office Address	(Florida street address)	

New Registered Agent's Signature, if changing Registered Agent:

A. If amending name, enter the new name of the corporation:

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

I hereby accept the appointment as registered 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>P</u>	BEATRIZ E OCHOA	6531 NW 87 AUL Mann Fl 33178	Add Remove
UP(S)	SENGIO E OCHIA	6331 NO B7 AUE Mann FC	□ Add ଢ️ Remove
8	SEDICIO E DOHOA		¼ Add □ Remove
UP	Bootniz E OCHOA		— Madd
	ling or adding additional Articles, enter diditional sheets, if necessary). (Be specificational sheets)		
			
provisio	nendment provides for an exchange, recloses for implementing the amendment if rot applicable, indicate N/A)		
			<u> </u>
	·		

•	(s) adoption: 4-20-09
The date of each amendment(s) adoption:
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e 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)
action was not required.	e adopted by the board of directors without shareholder action and shareholder e adopted by the incorporators without shareholder action and shareholder
Dated	4-20-09 5045(2166)
Signature	
selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)
	SERGIO E DCHOA
	(Typed or printed name of person signing)
	(P (S)
	(Title of person signing)