73424

| (Re | equestor's Name) | | | |
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| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | isiness Entity Name | e) | | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: RINCON DE SAN L. | |
|---|---|
| 734242 DOCUMENT NUMBER: | |
| | |
| The enclosed Articles of Amendment and fee are subm | offed for filing |
| Please return all correspondence concerning this matter | to the following: |
| JOAQUIN A GONZALEZ | |
| | Name of Contact Person) |
| RINCON DE SAN LAZARO INC | |
| | (Firm/ Company) |
| 1190 E 4 AVE | |
| | (Address) |
| HIALEAH, FL 33010 | |
| 1 | (City/ State and Zip Code) |
| joaquingonzalez@tiregroup.com | |
| E-mail address: (to be used | for future annual report notification) |
| For further information concerning this matter, please of | eall: |
| JOAQUIN A GONZALEZ | 305 887-0944 at |
| (Name of Contact Person) | (Area Code) (Daytime Telephone Number) |
| Enclosed is a check for the following amount made page | yable to the Florida Department of State: |
| S35 Filing Fee | □S43.75 Filing Fee & □S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed) |
| Mailing Address | Street Address |

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

Articles of Amendment

FILED

Articles of Incorporation 17 OCT 13 PM 3: 04

RINCON DE SAN LAZARO INC. (Name of Corporation as currently filed with the Florida Dept. of State) 151 37. 734242 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp " or "Inc." "Company" or "Co," may not be used in the name B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: JOAQUIN A GONZALEZ Name of New Registered Agent: 15326 SW 53 ST (Florida street address) New Registered Office Address: MIAMI New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 X Remove X Add | <u>V</u> <u>Mil</u> | n <u>Doe</u> ke Jones l <u>y Smith</u> | |
|-----------------------------------|---------------------|--|---|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | T/D | JESUS SUAREZ | 5350 SW 133 CT |
| Add | | | MIAMI, FL 33175 |
| X Remove | | | |
| 2) Change | VPE | FRANCISCO PEREZ | 7121 MIAMI LAKES DR APT Q5 |
| X Add | | | MIAMI LAKES, FL 33014 |
| Remove | Т | DAISY TRIANA | 8881 NW 108 ST |
| 3) Change X Add | <u> </u> | | HIALEAH GARDENS, FL 33018 |
| Remove | | | |
| 4) Change | V.S | SONIA CORDOVES | 11010 SW 88 ST #200 |
| X Add | | | MIAMI, Fl. 33176 |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | *************************************** |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| E. | If amending or adding | additional Arti | cles, enter chan | ige(s) here | <u>:</u> : | | | |
|----|----------------------------|-----------------|------------------|-------------|-------------|------------------|-------------|----------|
| | (attach additional sheets, | if nevessary). | (Be specific) | | | | | |
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| • | 10/12/2017 | |
|---|--|------------------------|
| The date of each amendment(s): | adoption: | , if other than the |
| date this document was signed. | | |
| | /12/2017 | |
| Effective date if applicable: | | |
| <u></u> | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this bedocument's effective date on the I | block does not meet the applicable statutory filing requirements, this date will Department of State's records. | I not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were was/were sufficient for approx | adopted by the members and the number of votes cast for the amendment(s) aval. | |
| There are no members or me adopted by the board of dire | mbers entitled to vote on the amendment(s). The amendment(s) was/were ctors. | |
| Dated | 112/17 | |
| | | |
| have not | airman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator—If in the hands of a receiver, trustee, or rt appointed fiduciary by that fiduciary) | |
| JOAQ | DUIN A GONZALEZ | |
| | (Typed or printed name of person signing) | |
| PRES | IDENT | |
| | (Title of person signing) | |