## K20103

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

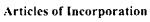
NAME OF CORPORATION: HERKO THIERNATION A	く テル
DOCUMENT NUMBER: K 2010.3	`, '
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	THE STATE OF THE S
SERMAN PEND, P.A.  Firm/Company  13831 5W 59 5+reet Suite/  Address  MIRMI, Fl., 33189	1000
City/ State and Zip Code	
Germanyeras (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Contact Person at (385) 385 001  Area Code & Daytime Telephone Number	Ĺ
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$3.55 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  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
Tallahassee, FL 32301

## **Articles of Amendment** to



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•	4 mai alam mé 4			The same
	Articles of A to	mendment		Ġ,
	Articles of Inc	orporation		75 m
1/20110 73	of / := /		4	<b>*</b>
HERKO IN	TERNI	4 T 10N	42, 1X	<u> </u>
\ <u> </u>		y filed with the Florida	Dept. of State)	
	K 2010			
(I	Document Number of	f Corporation (if known)		
rsuant to the provisions of section 607,1006, F Articles of Incorporation:	florida Statutes, this	Florida Profit Corporat	tion adopts the follow	ing amendment(s)
If amending name, enter the new name of	the corporation:			
				The new
time must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "ord" chartered," "professional association," of	Corp," "Inc," or " or the abbreviation "	Co". A professional co	ncorporated" or the orporation name mus	Abbreviation it contain the
Enter new principal office address, if application of the second of the				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	E BOX)			
If amending the registered agent and/or renew registered agent and/or the new registered			e name of the	
Name of New Registered Agent	<del></del> -	7-41		
·				<u></u>
	(Florida str	vet address)		
New Registered Office Address:			, Florida	
		(City)	(Zi	p Code)
w Registered Agent's Signature, if changin ereby accept the appointment as registered ag	g Registered Agent gent. I am familiar	<u>:</u> with and accept the oblig	gations of the position	1.
	Signature of New F	Registered Agent, if chan	ging	

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	<u>PT</u> <u>Jo</u>	hn Doe	
X Remove		ike Jones	
X Remove			
<u>X</u> Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			****
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change (Attach additional sheets, if necessary). (Be specific)	(s) here:	
ARTICLE VIII		
Shares	_	
<u>ADD:</u>		
HERMAN BORDA	67 5hares	677
HERMAN BORDA JUAN C. GUTIERREZ	33 Share	33'.
	100 share	100 h
DELETE:		
HERMAN BORDA	70	
HERMAN BORDA _ JUAN C GUTIERREY	3.0	
		<del></del>
		·
F. If an amendment provides for an exchange, reclassificate provisions for implementing the amendment if not con-		ares,
(if not applicable, indicate N/A)		
	-	

•	$\sim$ / /	•
The date of each amendment(s) adoption: date this document was signed.	9/2/00	, if other than the
Effective date <u>if applicable</u> :	9/2/00	·
	(no more than 90 days after amendm	ent file date)
Note: If the date inserted in this block doe document's effective date on the Department	s not meet the applicable statutory filing of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for	he shareholders. The number of votes cas or approval.	t for the amendment(s)
The amendment(s) was/were approved by must be separately provided for each vot	the shareholders through voting groups. ing group entitled to vote separately on the	The following statement e amendment(s):
"The number of votes career the ar	mendment(s) was/were sufficient for appro	val
by		, 
(	voting group)	
The amendment(s) was/were adopted by t action was not required.	he board of directors without shareholder	action and shareholder
The amendment(s) was/were adopted by t action was not required.	he incorporators without shareholder actio	n and shareholder
1/2/		
Dated		
Signature		
	resident or other officer – if directors or of neorporator – if in the hands of a receiver.	
	ary by that fiduciary)	trustee, or other court
	TUAN. C. GUTIEN	RREZ
	(Typed or printed name of person signir	
	5・ア・カ	
	(Title of person signing)	