## N09000008272

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2009 OCT 29 PM 2: 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

OCT 3 0 2009

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPO	RATION: DESFILE PUE	ERTORRIQUENO DE C	OSCEOLA, INC.
DOCUMENT NUM	BER:		
The enclosed Article	s of Amendment and fee are sub	mitted for filing.	
Please return all corre	espondence concerning this mate	ter to the following:	
		on Quinones	
	(Name of	Contact Person)	
<del></del>	(Firm	/ Company)	
<del></del>	- · · · · · · · · · · · · · · · · · · ·	N. Main St.	
	(4	Address)	
		tee, FL. 34744	
	•	te and Zip Code)	
	desfilepuertorriques E-mail address: (to be use	nodeosceola@gmail.com d for future annual report notific	ation)
For further informati	on concerning this matter, please	e call:	
Wilber Rosado		at ( 407 ) 344-278	39
(Name	of Contact Person)	(Area Code & Dayti	me Telephone Number)
Enclosed is a check t	or the following amount made p	ayable to the Florida Departmen	t of State:
<b>☑</b> \$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)
Ame Divis P.O.	ing Address Indment Section Ission of Corporations Box 6327 Indexed the section of the section o	Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	er Circle

## **Articles of Amendment**

Angor Phy 2: 12 **Articles of Incorporation** Mame of Corporation as currently filed with the Florida Dept. of State) N09000008272 (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:

The new name must be distinguishable and coabbreviation "Corp." or "Inc." "Company" o		corporated" or the
B. Enter new principal office address, if app (Principal office address MUST BE A STREE	<del></del>	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)		
D. If amending the registered agent and/or r new registered agent and/or the new regis		nter the name of the
Name of New Registered Agent:	Ramon Quinones	
	821 N. Main St	
New Registered Office Address:	(Florida street address)	
	Kissimmee	, Florida 34744 (Zip Code)
	(City)	(Zip Code)

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.

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	
Presid	William Santana	821 N. Main St Kissimmee, FL. 34744	_ □ Add □ ☑ Remove	
Vice P	Roberto Martinez	821 N. Main St. Kissimmee, FL. 34744	☐ Add ☐ Remove	
Treas	Ingrid Figueroa	821 N. Main St Kissimmee, FL, 34744	☐ Add ☐ Remove	
(attach add	ing or adding additional Articles, enter ditional sheets, if necessary). (Be speci			
President: - Ramon Quinones Add				
Vice-i	Presidente - Ingria	! Figueroa Ac	14	
Trasure	er - Wilber	Rosado As	44	
7 <u> </u>				
	Same Addres	<u> </u>		
	821 N. A	lain St.		
	Kissimmee	s: lain St. ., FL. 34744		
*******				

The date of each amendment	t(s) adoption: October 1, 2009
Effective date if applicable:	October 1, 2009 (date of adoption is required)
_	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.
There are no members or radopted by the board of dir	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated	9/28/09
Signature	Kama (15
	the chairman or vice chairman of the board, president or other officer-if directors
	e not been selected, by an incorporator - if in the hands of a receiver, trustee, or
	er court appointed fiduciary by that fiduciary)
	TAMON SUINDAVES
	(Typed or printed name of person signing)
	PRESIDENTE
	(Title of person signing)