## N10000002771

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

CAMINO	DEL.	MATRIMONIO	INC

F. Bones	Q 😅
JUL -5	PH 4:51

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CAMINO DEL MA NAME OF CORPORATION:	TRIMONIO INC
	ALEAHASSEE FEORID
DOCUMENT NUMBER: N10000002771	
The enclosed Articles of Amendment and fee are sub	mitted for filing.
Please return all correspondence concerning this matt	er to the following:
LUIS FERNANDO GOMEZ	
	(Name of Contact Person)
	(Firm/ Company)
9121 N.W. 152ND STREET	
	(Address)
MIAMI LAKES, FL, 33018	
	(City/ State and Zip Code)
LAFE39@HOTMAIL.COM	
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	call:
LUIS FERNANDO GOMEZ	786 251-9427 at
(Name of Contact Persor	
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address	Straat Addrase

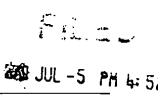
Mailing Address

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** Articles of Incorporation $\mathbf{of}$



CAMINO DEL MATRIMONIO INC

(Name of Corporation as curren	uy mea with the Florida	Dept. of State) SEBRETARY OF ALLAHASSEE, P
N10000002771		PALCIARASSEE P
(Document Numb	er of Corporation (if know	n)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Pi</i>	rofit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	
		The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" o	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>	)	
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
D. If amending the registered agent and/or registered office	ce address in Florida, ent	er the name of the
new registered agent and/or the new registered office a		AT THE HARRY WATER
Name of New Registered Agent:		
	(Florid	a street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent. I am fa	miliar 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)

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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	LUIS FERNANDO GOMEZ	9121 NW 152 STREET
X Add			MIAMI LAKES, FL 33018
Remove			
2) Change	D	LAURA GOMEZ	9121 NW 152 STREET
X Add			MIAMI LAKES, FL 33018
Remove			***
3 ) Change	S	HECTOR PONTE	2425 SW 80 AVE
X Add			MIAMI, FL 33155
Remove			
4) Change	T	JORGE MIRABENT	1791 BAY DRIVE
$\frac{X}{X}$ Add		<del></del>	MIAMI BEACH, FL 33141
Remove			<u> </u>
5) Change	D	ABEL TRIGOURA	
Add			
X Remove			
6) Change	D	ANGELA TRIGOURA	
Add			
X Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
7) REMOVE TREASURER SERGIO CRUZ			
8) REMOVE SECRETARY LUISA CORREA			

1 . .

	MAY 31, 2019	
The date of each amendmen	t(s) adoption:	, if other than the
date this document was signed	l,	
Effective date if applicable:		
Effective date in applicable.	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.	be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) pproval.	
There are no members or adopted by the board of	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated	Lufa Go	
(By the	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	_
LU	JIS FERNANDO GOMEZ	
	(Typed or printed name of person signing)	
Di	IRECTOR	
	(Title of person signing)	