## N11000010123

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:DAME ALAS IN	C.	
DOCUMENT NUMBER: N11000010123		
The enclosed Articles of Amendment and fee are sub-	nitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
PEDRO CAVALCANTI		
(Nan	ne of Contact Person)	
DAME ALAS INC.		
•	Firm/ Company)	
600 GRAPETREE DRIVE, APT 8EN		
	(Address)	
KEY BISCAYNE, FL, 33149		
(City	State and Zip Code)	
pedro@damealas.org E-mail address: (to be used	for future annual report	notification)
E-man address. (to be dised	tor ratare annual report	nonneation)
For further information concerning this matter, please	call:	
PEDRO CAVALCANTI	at (_305	505-9525 ode & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Dep	artment of State:
Deas piras para Deaa as prica par el	다e45 75 PULL - PL - 6	Meso so para par
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status	Certified Copy	☐\$52.50 Filing Fee Certificate of Status
Certificate of Status	(Additional copy is	Certified Copy
	enclosed)	(Additional Copy is enclosed)
Mailing Address	Street	Address
Amendment Section		lment Section
Division of Corporations	Divisio	on of Corporations
P.O. Box 6327		Building
Tallahassee, FL 32314	2661 E	xecutive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment** Articles of Incorporation of

DAME ALAS INC.	7
(Name of Corporation as currently fi	led with the Florida Dept. of State)
N11000010123	
(Document Number of Corporat	tion (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes following amendment(s) to its Articles of Incorporation:	, this Florida Not For Profit Corporation adopts the
A. If amending name, enter the new name of the corporation	on:
The new name must be distinguishable and contain the word "c" "Corp." or "Inc." "Company" or "Co." may not be used in the	
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 MAY BE A POST OFFICE BOX)	
-	
<u>-</u>	
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 ad	
Name of New Registered Agent:	
Name of New Registered Agent.	· · · · ·
	N1
New Registered Office Address:	lorida street address)
	DL 71
	, Florida
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam.	
т пот соу иссерт те иррошитет из тединетей идет. Тит јит	mar will and accept the congutions of the position.
Clarify CM Date	
Signature of New Registe	rea Ageni, ij changing

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## If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officers/director. (Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an

additional sheet.)

Title(s)	<u>Name</u>		Address	
1) <u>T</u>	GIOVANNA F. MECO		O GRAPETREE DRIVE, APT 8EN EY BISCAYNE, FL, 33149	
2)				
3)				
4)				
5)				
6)				
If REMOVI	NG an officer and/or director, pleas	e list the title(s) and n	ame of the officer/director to be rem	 oved:
Title(s)	Name	<u>Title(s)</u>	<u>Name</u>	
1) <u>T</u>	PEDRO CAVALCANTI	4)		
2) <u>D</u>	MATEO ASCENCIO	5)		
3) D	PEDRO CAVALCANTI	6)		

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
<u> </u>	
	<u> </u>
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the date of each amendment(s) adoption: 11/21/2011
Effective date if applicable: 11/21/2011
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 11/21/2011 Signature
(By the chairman of vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
PEDRO CAVALCANTI
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

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