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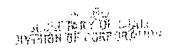
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Alas Jolidarias Inc
DOCUMENT NUMBER: N 1300000 9913
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ricardo E. Pines Esq. (Name of Contact Person)
Ricardo E. Pirer P.A (Firm/Company)
3301 Ponce de Leon, #200
(Address)
Cord 6abler- F1- 33134
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Prando E Piner 3-5-461-5757
(Name of Contact Person) at 3-5-461-5757  (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
Status Certificate of Status
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301





2016 OCT 25 PH 3: 50

## Articles of Amendment to Articles of Incorporation

Article	s of Incorporation	
-1 <1.0.	of	
Alas Jolidarias	Tac	
(Name of Corporation as currer	tly filed with the Florida Dept. of Stat	e)
N 1300000 9913		
	per of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporate	ion adopts the following
A. If amending name, enter the new name of the corporat	ion:	
a/a		The new
name must be distinguishable and contain the word "corpora	tion" or "incorporated" or the abbrevia	
"Company" or "Co." may not be used in the name.	1	
3. Enter new principal office address, if applicable:	N/ P	
Principal office address MUST BE A STREET ADDRESS	)	<del></del>
-		
Enter new mailing address, if applicable:	1.10	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
	-1-2-12-1	
o. If amending the registered agent and/or registered office	ce address in Florida, enter the name o	of the
new registered agent and/or the new registered office a		
Name of New Registered Agent:	NIA	
- Anne of the Wilder Court of the Court of t		
	(Fluida anna addina)	
New Registered Office Address:	(Florida street address)	
<del></del>	<del></del>	orida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Registered		
hereby accept the appointment as registered agent. I am fai	niliar with and accept the obligations of	the position.
		<u> </u>
Si	ignature of New Registered Agent, if cha	nging

Page 1 of 4



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.

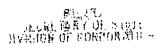
Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change X Remove X Add	<u> ⊻ Mike</u>	Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) <u>X</u> Change Add	UP 5	Lerly C. Simon Peralta	Doral-F1 33172
Remove			
2) Change			
Remove			
3 ) Change			
Remove			
4) Change	<del></del>		
Remove			
5) Change Add			
Remove			
6) Change			
Add Remove			
KCHIOYC			



шасп а	ding or adding a dditional sheets,	ıf necessary).	(Be specij	nc)				
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The date of each amendment(s) adopti	n:, if other than the
date this document was signed.	n:
Effective date if applicable:	10/20/16
	(no more than 90 days after amendment file date)
<u>Note:</u> If the date inserted in this block dedocument's effective date on the Department	es not meet the applicable statutory filing requirements, this date will not be listed as the ent of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopte was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)
There are no members or members of adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was/were
Dated	0(16
Signature	Deliver)
have not been se	r vice chairman of the board, president or other officer-if directors ected, by an incorporator—if in the hands of a receiver, trustee, or ited fiduciary by that fiduciary)
Les	Typed or printed name of person signing)
<u>' Uì</u>	ce President
	(Title of person signing)