1160000007269

(Re	equestor's Name)	
(Ad	dress)	****
(Ad	dress)	
(Cit	ry/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



300292677933

300292677933 11/28/16--01036--008 **25,00

02/09/17--01015--027 **10.00

2017 FEB -9 P 4: 52
SECRETARY OF STATE

FEB 1 0 2016

T. LEMIEUX



COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION	DON MIGUEL (CHARITIES INC			
	N16000007369				
DOCUMENT NUMBER: _		<u> </u>			
The enclosed Articles of Am	endment and fee are subm	itted for filing.			
Please return all corresponde	nce concerning this matter	to the following:			
		ROY LOPEZ			
	((Name of Contact Pers	son)	- 0 101	
	DON	MIGUEL CHARITIE	S INC.		
		(Firm/ Company)		·	
	5600	SW 135 AVE. NO. 2	215		
		(Address)			
		MIAMI, FL. 33183			
	(City/ State and Zip Co	ode)		
	GLT	TRADING@MSN.CO	М		
E	mail address: (to be used	for future annual repor	t notification	i)	
For further information conc	erning this matter, please o	eall:			
ANELY BI	RITO	at	305 788 1028	3	
	(Name of Contact Person)		Area Code)	(Daytime Telepl	none Number)
Enclosed is a check for the fo	ollowing amount made pay	able to the Florida De	partment of	State:	
\$35 Filing Fee	□\$43.75 Filing Fee & [Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing A	ddrore	Stun	nt Addmana		

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



December 2, 2016

ROY LOPEZ 5600 SW 135 AVE NO 215 MIAMI, FL 33183

SUBJECT: BRAVO INTERNATIONAL DISTRIBUTION LLC

Ref. Number: L16000007369-

1: L16000007369-WNONG (N/6000007369) DON MAGUEL CHANATTES DIRE

We have received your document for BRAVO INTERNATIONAL DISTRIBUTION LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This is a Corporation not a LLC. The document you sent in is not correct.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 916A00025689

Articles of Amendment to Articles of Incorporation of

J.	
OON MIGUEL CHARITIES IN	C.
currently filed with the Flori	da Dept, of State)
N16000007369	
nt Number of Corporation (if known	own)
a Statutes, this <i>Florida Not For</i>	Profit Corporation adopts the following
orporation:	
	The new
corporation" or "incorporated	" or the abbreviation "Corp." or "Inc."
<u></u>	
(V)	
<u></u>	
	
red office address in Florida, e	enter the name of the
office address:	
(Flo	rida street address)
	, Florida
(City)	(Zip Code)
ristered Agent:	
I am familiar with and accept t	
	2017 SEEST
C:	red Agent, if changing
Signature of New Registe	
Signature oj New Registe	SSE
	currently filed with the Flori N16000007369 at Number of Corporation (if knows a Statutes, this Florida Not Forentation: corporation: corporation or "incorporated as: DRESS) red office address in Florida, office address: (Florida (City)) cistered Agent: I am familiar with and accept to

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>V</u> <u>Mik</u>	n Doe te Jones y Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1)Change	P	MIGUEL A. LOPEZ JR	5600 SW 135 AVE	_
Add			215	
X Remove			MIAMI, FL 33183	_
2) X Change	P	ROY LOPEZ	5600 SW 135 AVE	
Add			215	
Remove			MIAMI, FL. 33183	
3) Change	TR	LUSETTE C. LOPEZ	5600 SW 135 AVE	
X Add			215	-
Remove			MIAMI, FL. 33183	-
4) Change				
Add				_
Remove				-
5) Change				_
Add				-
Remove				-
6) Change				_
Add				_
Remove				

attach additional sheets,	if necessary). (Be s	nter change(s) her		
• • •				
	-			
			•	
			1. 10.	 -
		<u></u>		
-				
			<u> </u>	
	· · · · · · · · · · · · · · · · · · ·			
		*		
		·····		
· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	

		SEPTEMBER 23RD, 2016	
	e date of each amer this document was	signed.	_, if other than the
Eff	ective date <u>if appli</u>	NOVEMBER 18TH, 2016	
		(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requirements, this date will not bate on the Department of State's records.	e listed as the
Ado	option of Amendm	ent(s) (<u>CHECK ONE</u>)	
	The amendment(s was/were sufficient) was/were adopted by the members and the number of votes cast for the amendment(s) at for approval.	
	There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	
	Dated	JANUARY 23RD, 2017	
	Signature		-
		(By the chairman or vide 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)	
		ROY LOPEZ	
		(Typed or printed name of person signing)	
		PRESIDENT	
		(Title of person signing)	