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APPROVEU

## **COVER LETTER**

TO: Amendment Section
Division of Corporations,

Division of Corporations,		
NAME OF CORPORATION: Cantabria H	ouse U.S.A., Inc.	
DOCUMENT NUMBER: 650342176		
The enclosed Articles of Amendment and see are submitted	for filing.	
Please return all correspondence concerning this matter to th	e following:	
Jose Luis Machado, Esq.		
(Nam	e of Contact Person)	
Law Offices of Machado &	Herran, P.A.	
(I	Firm/ Company)	
8500 S.W. 8th Street, Suite	238	
	(Address)	
Miami, Florida 33144		
(City/	State and Zip Code)	
jose@machadolaw.d	com	
E-mail address: (to be used for fu	ture annual report notification)	
For further information concerning this matter, please call:		
Jose Luis Machado, Esq.	at(305)261-5355	
(Name of Contact Person)	(Area Code & Daytime Telephon	e Number)
Enclosed is a check for the following amount made payable	to the Florida Department of State:	
(Ad	1.75 Filing Fee & U\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
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 to Articles of Incorporation of

	Cantabria F	House U.S.A., Inc.				
(Name of Corporation as current	y filed with the Flo	rida Dept. of State)				
650342176						
(Doc	ument Number of Co	orporation (if known)				
Pursuant to the provisions of section 617. amendment(s) to its Articles of Incorporate		es, this <i>Florida Not For Profit Corpo</i>	ration adopts the	following	;	
A. If amending name, enter the new na	me of the corporati	ion:				
				_The new		
name must be distinguishable and contain "Company" or "Co." may not be used in		tion" or "incorporated" or the abbre	viation "Corp." o	r "Inc."		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2250 S.W. 131 Place				
		Miami, Florida 33175				
C. Enter new mailing address, if appli	cable:	2250 C.W. 424 Diago				
(Mailing address MAY BE A POST OFFICE BOX)		2250 S.W. 131 Place				
		Miami, Florida 33175				
				₹	هيد	
D. If amending the registered agent an new registered agent and/or the new			ie of the	ECRET	3UA 1	7,7
Name of New Registered Agent: Carmina Mestre  2250 S.W. 131 Place			AR'Y SSE	8	一川から	
		131 Place			PH	
New Registered Office Address:		(Florida street address)		LOR	မှာ မွှ	•
<del>- , - , - , - , - , - , - , - , - , - ,</del>	Miami	Florida	33175	AGI F	7	
	(City)	, 1 101100	(Zip Code)	1		
New Registered Agent's Signature, if ch	nanging Registered	Agent:				
I hereby accept the appointment as registe			s of the position.			
_	Signature of New	Registered Agent if changing				

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.

Example: X.Change X.Remove X.Add	<u>V</u> <u>Mik</u>	n <u>Doe</u> se <u>Jones</u> sy Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PD	Manuel A. Herran	8460 S.W. 5th Street
Add			Miami, Florida 33144
X Remove			
2) Change	<u>P</u>	Carmina Mestre	2250 S.W. 131 Place
X Add			Miami, Florida 33175
Remove			
3) Change			
Add			
Remove			
4) Change			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			****

amending or adding additional Art ttach additional sheets, if necessary).	(Be specific)

	e date of each amendment(s) adoption:e this document was signed.	_, if other than the				
Eff	ective date <u>if applicable</u> :  (no more than 90 days after amendment file date)	_				
Ade	option 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.					
	Signature  (By the chairman or 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)					
	Luciano Suarez					
	(Typed or printed name of person signing)					
	Vice President					
	(Title of person signing)					