## P00000106019

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Amend
TB 6/8/09

## COVER LETTER

Division of Corporations NAME OF CORPORATION: <u>CRONOS</u> STAR, CORP. P00000 106019 DOCUMENT NUMBER: \_\_\_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: OMAR J. CRUZ TOLEDO

Name of Contact Person CRONOS STAR, CORP. 9707 NW 126 TH TER. HIALEAH GARDENS FL 33018
City/State and Zip Code Cronosmar a hotmail. com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 
 OMAR
 J
 CRU2
 TOLEOO
 at (305)
 362
 1149

 Name of Contact Person
 Area Code & Daytime Telephone Number
 Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$52.50 Filing Fee **1** \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)

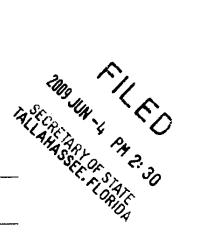
**Mailing Address** 

**TO:** Amendment Section

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**



(Name of Corporation as currently filed with the Florida Dept. of State) P 00000 10 6019
(Document Number of Corporation (if known)

lowing

Pursuant to the provisions of section 607.1006, Floamendment(s) to its Articles of Incorporation:	lorida Statutes, this Florida Profit Corporation adopts the foll
A. If amending name, enter the new name of the	corporation:
	The new
	word "corporation," "company," or "incorporated" or the ignation "Corp," "Inc," or "Co". A professional corporation ional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicab	hle:
(Principal office address MUST BE A STREET AD	
C. Enter you mailing address if analisable.	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Bo	ROX)
(	
P. 10	
	tered office address in Florida, enter the name of the
new registered agent and/or the new registered	ed office address:
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Re	egistered Agent:
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
Sionate	ture 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)

<u>Title</u>	<u>Name</u>	Address		
$\mathcal{D}_{-}$	ORDUNEZ, JOHANNY	9707 NW 126th TER. HIALEAH GARDEUS FL, 33018	Add ■ Remove	
<u>D</u> _	TOTH , ANDRES	9707 NW 126th TER. HIBLEAH GARDENS FL, 33018	Add Remove	
D	RODRIGUEZ, ROBERTO	9707 NW 126th TER. HIALEAU GARDENS FL, 33018		
	ding or adding additional Articles, enter additional sheets, if necessary). (Be speci			
<del></del>				
<u>provisi</u>	nendment provides for an exchange, recons for implementing the amendment if ot applicable, indicate N/A)			
			····	
	A CONTRACT OF THE CONTRACT OF			

The date of each amendment(s) ado	ption:	<u> 26 - </u>	01-	2009
Effective date if applicable: (no me	ore than 90 day	D 6 – s after amendm	O/ — ent file date)	2009
Adoption of Amendment(s)	(CHECK	ONE)		
The amendment(s) was/were adop by the shareholders was/were suff			umber of votes	cast for the amendment(s)
The amendment(s) was/were appromust be separately provided for ed				
"The number of votes cast for	the amendment	t(s) was/were si	ufficient for app	roval
by(voting	group)		.,,	
☐ The amendment(s) was/were adoptaction was not required. ☐ The amendment(s) was/were adoptaction	-			
selected, by	tor, president or	or — if in the har	if directors or o	officers have not been trustee, or other court
	MAR	J	CRUZ of person signin	TOLED O
	PRES!	DEN ;	<i>T</i>	