

3054166811

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(((H15000300224 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : AGI REGISTERED AGENTS, INC.

Account Number : I20000000205 : (305)416-6800 Fax Number : (305)416-6811

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COR AMND/RESTATE/CORRECT OR O/D RESIGN XAVIER 307 INC.

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00



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ADAMS GALLINAR PA

Tallahassee, FL 32301

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TO: Amendment Section Division of Corporatio	ns				
NAME OF CORPORATI	ON: XAVIER 307 INC		·		
DOCUMENT NUMBER: P01000048478					
The enclosed Articles of An	nendment and fee are su	bmitted for filing.			
Please return all correspond	ence concerning this ma	tter to the following:			
Dian	e M. Hemandez				
		Name of Contact Perso	on .		
Adai	ns Gallinar, P.A.				
-		Firm/ Company			
0001	Brickell Avenue, Suite	300			
		Address			
Miar	ni, Florida 33131				
		City/ State and Zip Cod	de		
dhernande	z@agilaw.com				
	E-mail address: (to be us	sed for future annual repor	t notification)		
For further information con	cerning this matter, pleas	se call:			
Diane M. Hernandez		at (³⁰⁵	416-6800		
Name of Co	ntact Person		ode & Daytime Telephone Number		
Enclosed is a check for the	following amount made	payable to the Florida Dep	partment of State;		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Division e P.O. Box	ent Section of Corporations	Amen Divisi Clifto	Address dment Section on of Corporations n Building Executive Center Circle		

ADAMS GALLINAR PA

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Articles of Amendment to Articles of Incorporation

of		
XAVIER 307 I	NC	
f Corporation as currently fil	ed with the Florida Dept. of State)	
	-	_
(Document Number of Co	rporation (if known)	
1006, Florida Statutes, this Flor	rida Profit Corporation adopts the following amen	dment(s) to
me of the corporation:		
ation "Corp," "Inc," or "Co" tion," or the abbreviation "P.A If applicable:	"company," or "incorporated" or the abbrevia A professional corporation name must contain "	new million FILED
		9: 10
	in Florida, enter the name of the	
AGI Registered Agent, Inc.		
1000 Brickell Avenue, Suite 3	00	
(Florida street e	address)	
Miami	, Florida 33131	_
(Cit	y) (Zip Code)	
ered agent. I am familiar with	nof-	
	(Document Number of Co. 1006, Florida Statutes, this Florida Statutes, this Florida In the word "corporation," ation "Corp," "Inc," or "Co"tion," or the abbreviation "P.A if applicable: TREET ADDRESS) icable: OFFICE BOX AGI Registered office address: AGI Registered Agent, Inc. 1000 Brickell Avenue, Suite 3- (Florida street a Miami (City thanging Registered Agent: ered agent. I am familiar with	(Document Number of Corporation (if known) (The time of the corporation: (The time of the corporation: (Corporation adopts the following amendation (Corporation) (Corporation adopts the following amendation (Corporation) (Corporation adopts the following amendation (Corporation) (The time of the corporation (If known) (The time of the corporation (If known) (Corporation adopts the following amendation (Corporation adopts the following amendation (Corporation) (Corporation (If known) (The time of the corporation (If known) (It applies the corporation (If known) (It applies the corporation (If known) (It applies the corporation (It

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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	<u>PT John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	ce Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	DVP	Adolfo Batista Llamas	455 Grand Bay Drive
Add			Suite 382
X Remove			Key Biscayne, FL 33149
2) X Change	D/P/S/T	Alexandra Batista Llado	455 Grand Bay Drive
Add			Suite 382
Remove			Key Biscayne, FL 33149
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	***		
Add			
Remove			
6) Change			
Add			
Remove			(((H15000300224 3)))

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	if necessary). (s, enter change(s) Be specific)			
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				(((H15000300224 3)))
The date of eac				, if other than the
Effective date <u>i</u>	f applicable			
			(no more than 90 days after amendment file date)	
Note: If the da document's effe	te inserted i ctive date or	n this block does not the Department of St	meet the applicable statutory filing requirements, this ate's records.	s date will not be listed as the
Adoption of Ar	nendment(s	(CHE	CK ONE)	
		vere adopted by the sh were sufficient for app	areholders. The number of votes cast for the amendme proval.	ent(s)
			harcholders through voting groups. The following state roup entitled to vote separately on the amendment(s):	ement
"The n	umber of vo	tes cast for the amend	ment(s) was/were sufficient for approval	
by			g group)	
		(votin	g group)	
The amendmaction was no		vere adopted by the bo	pard of directors without shareholder action and shareholder	older
The amendmaction was no		vere adopted by the in-	corporators without shareholder action and shareholder	r
	Dec Dated	ember 21, 2015		
	Dateu		Maloula	
	Signature		ent or other officer - directors or officers have not be	
			porator — if in the hards of a receiver, trustee, or other o	
		Robert R. Ada	ams, Esq.	
		(T)	yped or printed name of person signing)	

(Title of person signing)

Authorized Representative