P0200085198

(R	equestor's Name)	
· (A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)
PICK-UP	☐ WAİT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
L		

Office Use Only



000235047150

05/15/12--01013--005 **35.00



MAY 1 8 2012 C. MUSTAIN



COVER LETTER

TO: Amendment Section Division of Corporations

. NAME OF CORPOR DOCUMENT NUMB	DEL ORBE BER: P0200008519		S CORP	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	VIR	GINIA M. DEL C	RBE	
	Name of Contact Person DEL ORBE & ASSOCIATES, CORP.			
	Firm/ Company			
	16969 NW 67TH AVE. SUITE 107			
		Address		
	MIAMI I	_AKES, FL. 330		
		City/ State and Zip Code	e	
	DELORBENASS	_		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
VIRGINIA M.	DEL ORBE	at (305	817-0814	
Name of Contact Person Area Code & Daytime Telephone Num		de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department 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)	
Ame Divi P.O.	ling Address Industrial Section Is a sion of Corporations Box 6327 Inhassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

DEL ORBE & ASSOCIATES CORP.

nt(s) to

 (Name of Corporation as 	currently filed with the F	lorida Dept. of State)			
	P02000085198	3			
(Documer	nt Number of Corporation (i	f known)	- "		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation ad	opts the following	, ameno	lmer
A. If amending name, enter the new na	me of the corporation:				
			. 101 .1 1		new'
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc." or "	Co". A professional corpora	rated or the ab tion name must c	oreviai ontain	the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		16969 NW 67TH	I AVE		
		SUITE 107	替		
		MIAMI LAKES, F	FL 33018	12	
C. F.A				E	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)				7	7
			-1	- O	1.12
				=	C
				۲ ن	
D. If amending the registered agent an			e of the	Œ	
new registered agent and/or the nev	v registered office address	<u>:</u>	Яў.		
Name of New Registered Agent	VIRGINIA M. DE	EL ORBE			
	4508 SW 160TH	HAVE APT 724			
	(Florida str	eet address)			
New Registered Office Address:	MIRAMAR	Florida \$	33027		
Hen Registered Office Hadress.	(City)	, 1 lorida_	(Zip Code)		
New Registered Agent's Signature, if cl I hereby accept the appointment as regist			of the position		
Thereby decept the appointment as regist	creatingerii. Jum jamilian	Edo -	oj ine position.		
Sig	gnature of New Registered	Agent, iD hanging			

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</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	SV	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change X Add Remove	CEO	CLODOALDA A. ACOSTA DE NUNEZ	7560 NW 173 LN MIAMI LAKES, FL. 33015
2) Change Add Remove			
3) Change Add Remove		.	
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

If amending or adding addi (åttach additional sheets, if n			_	
	 			
· · · · · · · · · · · · · · · · · · ·				
				
 				
			,	
		· · · · · · · · · · · · · · · · · · ·		
If an amendment provides in provisions for implementing	ig the amendm			
(if not applicable, indic THE SHARES WIL		TRIBLITED	AS FOLLOW:	
/IRGINIA M. DEL			ASTOLLOW.	
			00/	
CLODOALDA A. A	COSTAL	JE NUNEZ	- 2%	
	· · · · · · · · · · · · · · · · · · ·			
	 			
			 ,	

The date of each amendment(s) adoption: 05/11/2012			
Effective date if applicable:	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.		
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):		
"The number of votes cast	for the amendment(s) was/were sufficient for approval		
by	(voting group)		
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder		
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder		
Dated 05/11/	2012		
selecto	director, president or other officer – if directors or officers have not been ed, by an incorporator – (in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)		
	VIRGINIA M. DEL ORBE		
	(Typed or printed name of person signing)		
	DIRECTOR		
	(Title of person signing)		