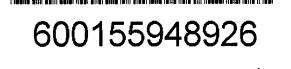
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(Requestor's Name)			
(Ad	dress)		
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PICK-UP	☐ WAIT	MAIL	
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NC Amend

(For Office Use Only)

	COVER LETTER		
TO: Registration Section Division of Corporati	ons		
SUBJECT: Maria De I	os Angeles Almuina, P.A		
	(Name of Partnership)		
DOCUMENT NUMBER:	203000023400		
	— जेवून कर र		
The enclosed Amendment to	Partnership Registration and fee(s) are submitted for fi	ling.	
Please return all corresponde	nce concerning this matter to the following:		
Maria De Los Angele	s Almuina		
(Name o	f Person)		
Maria De Los Angele	s Almuina. P.A		
(Firm/C			
•	• •	•	
2901 SW 144 Ct			
(Addres	;)		
Miami, Fl 33175			
	ate and Zip Code)		
For further information conc	erning this matter, please call:	,	
Vivian Uribe	at (305) 905.8889		
(Name of Person)	(Area Code & Daytime Telephone Number	er)	
CHINTIPE ADDING	MALLING ANDROCK		
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	
Division of Corporations		Division of Corporations	
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, Florida 32314		

CR2E067 (10/07)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 15, 2009

MARIA DE LOS ANGELES ALMUINA 2901 SW-144 COURT MIAMI, FL 33175

SUBJECT: MARIA DE LOS ANGELES ALMUINA P.A.

Ref. Number: P03000023400

We have received your document for MARIA DE LOS ANGELES ALMUINA P.A. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

THE ABOVE ENTITY IS A FLORIDA CORPORATION, NOT A LIMITED PARTNERSHIP. TO CHANGE THE NAME OF A CORPORATION, ARTICLES OF AMENDMENT SHOULD BE FILED.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist Supervisor

Letter Number: 609A00016693

OO:8 MA 4- MUL 6005 SECRETARY OF STATE AGIROLA: JASEE FLORIDA

COVER LETTER

CTO: Amendment Section Division of Corporations

·
NAME OF CORPORATION: Maria de los Angeles Almuina, F
DOCUMENT NUMBER: PO 3000023400
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Maria de Los Angeles Almuina Name of Contact Person
·
Firm/ Company
2901 SW 144 C+ Address
MIGMI FI 33175 City/State and Zip Code
almuinama bellsouth net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Vivian Vribe at (305) 905-8889 Name of Contact Person Area Code & Daytime Telephone Number
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation

of
Maria de Los Angles Almuna, P.A (Name of Corporation as currently filed with the Florida Dept. of State)
(Native of Corporation as Englished Wine Florida Dept. of State)
<u> </u>
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Almuina, P.A
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) MIQMI F 32 55 55 55 55 55 55 55
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent: Maria Almuina Oan St. 21111 C. +
New Registered Office Address: (Florida street address)
$\frac{ \mathcal{O}(V) }{(City)} \qquad \qquad \text{Florida} \qquad \frac{33175}{(Zip\ Code)}$
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature 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)

Title	Name	Address	Type of Action
	- · · · · · · · · · · · · · · · · · · ·		Add Remove
	·		
E. If amendi (attach ada	ng or adding additional Articles, ente- litional sheets, if necessary). (Be spec	r change(s) here: ific)	
		•	
F. If an ame provision (if not	ndment provides for an exchange, res s for implementing the amendment if applicable, indicate N/A)	lessification, or cancellation not contained in the amend	of issued shares. ment itself:

The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each 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 ³¹
(voling group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 5-22-09
Signature Ald Messeur
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Mana de 105 Angeles Almuina (Typed or printed name of person signing)
(Title of person signing)