10/04/2015 15:09



Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000246923 3)))



H160002469293ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

: (305)552-5973

Fax Number

: (305)675-5944

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:			

## COR AMND/RESTATE/CORRECT OR O/D RESIGN TWO GOOD FRIENDS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help 0CT 0 5 2015

C. CARROTHERS

H16000246923

## Articles of Amendment

LAZARUS

Articles of Incorporation of

(Name of Corporation as current		
	ly filed with the Florida Dept. of	State)
P03000032914		
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts	the following amendment(s) t
A. If amending name, enter the new name of the corporation;		
NOT APPLICABLE		The new
name must be distinguishable and contain the word "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation	d" or the abbreviation
B. Enter new principal office address, if applicable:	NOT APPLICABLE	
(Principal office address MUST BE A STREET ADDRESS)		
•		1
C. Enter new mailing address, if applicable:		77.0
(Mailing address MAY BE A POST OFFICE BOX)	NOT APPLICABLE	
-		
		E C
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address EDWIN MAURICIO CR	<u>s:</u>	<u>Ethe</u>
Name of New Registered Agent		
2300 NW 17TH AVENU		
(Fibrua si	treet address)	33142
New Registered Office Address:		orida
	(City)	(Lip Colle)

## H16000246923

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:

3052201440

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, Salty 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.

X Change	PT	John Doe	
X Remove	<u>A</u> .	Mike Jones	
X Add	<u>sv</u>	Saliy Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P\$	BRENDA GARCIA	2300 NW 17TH AVENUE
Add			MIAMI, FLORIDA
X Remove			33142
2) Change	P	EDWIN MAURICIO CRUZ MENDO	2300 NW 17TH AVENUE
X Add			MIAMI, FLORIDA
Remove			33142
3) Change	S	mariela patricia urbina	2300 NW 17TH AVENUE
X Add			MIAMI, FLORIDA
•	•		33142
Remove			
4)Change			
Add	•		
Remove			
5)Change			
Add			
Remove			
6) Change			
Add			
Remove			

D 78 11		H16000246923
If amending or adding additional Art (Attach additional sheets, if necessary).	cles, enter change(s) here:	
NOT APPLICABLE	(De specific)	
		·
	•	
		·
	<del></del>	
	·····	
F. If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancel adment if not contained in the a	<u>latjon of issued shares.</u> <u>mendment itself:</u>
NOT APPLICABLE		
	<del></del>	
	· · · · · · · · · · · · · · · · · · ·	
	<del></del>	
•		·

3052201440

PRESIDENT

H16000246923 The date of each amendment(s) adoption: \_ , if other than the date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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 (voting 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. Signature (By a director, president of 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) EDWIN MAURICIO CRUZ MENDOZA (Typed or printed name of person signing)

(Title of person signing)