# P03000066871

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

	•	
NAME OF CORPORATION: SALGO	EIRO ENTERPRI.	SES INC
DOCUMENT NUMBER: P03 0000	066871	
The enclosed Articles of Amendment and fee are	e submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Miguel (Name of	Contact Person)	<u> </u>
<u>Salgueiro</u> R	therposes n/Company)	
	W 5941 A (Address)	<u>ue</u>
	CS P/ 330 and and Zip Code)	
For further information concerning this matter, p	olease call:	
M, Ke Salgue 120 (Name of Contact Person)	at ( <u>305</u> ) <u>369</u> (Area Code & Daytime	Z 46 Z Telephone Number)
Enclosed is a check for the following amount ma	ade payable to the Florida Dep	artment of State:
\$35 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 18, 2009

MIGUEL SALGUEIRO SALGUEIRO ENTERPRISES, INC. 16400 NW 59TH AVE MIAMI LAKES, FL 33014

SUBJECT: SALGUEIRO ENTERPRISES, INC.

Ref. Number: P03000066871

We have received your document for SALGUEIRO ENTERPRISES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the title(s) of each officer in your document.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The capacity of the officer/director signing should be indicated. Ex. President, Vice President, Chairman of the Board, etc.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 209A00009171

SECRETARY OF STATE TALL HASSEE, FLORIDA

2009 HAR 26 AM 8: 00

RECEIVER

### ROOS MAR 26 AM 9: 42 Articles of Amendment to Articles of Incorporation Salqueiro Enterprises (Name of Corporation as currently filed with the Florida Dept. of State) P03000066871 (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: The new 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) 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: (Florida street address) New Registered Office Address: (City) 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
Member	Belkis Salgueiro	16400 NW 59 AUR MIAMILAKES FI 330 M	Add Remove
			Add Remove
			Add Remove
	ng or adding additional Articles, ente litional sheets, if necessary). (Be spec		
F. If an ame	endment provides for an exchange, re	classification, or cancellation of is	ssued shares,
<u>provision</u>	ns for implementing the amendment if applicable, indicate N/A)		

The date of each amendment(	(s) adoption: 1112008
Effective date if applicable:	1/1/2008
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	,,,
(	(voting group)
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
gelec	a director, president or other efficer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiductory by that fiduciary)
	(Typed or printed name of person signing)
	PD
	(Title of person signing)