

P03000085047

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)205-0380

From: Account Name : GUILLERMO RODRIGUEZ & ASSOCIATES, INC.  
Account Number : 120050000147  
Phone : (305)649-7128  
Fax Number : (305)643-2905

FILED  
07 AUG 24 PM 3:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COR AMND/RESTATE/CORRECT OR O/D RESIGN

LEFIA & JAZMIN, CORP.

RECEIVED

07 AUG 24 AM 8:00

DIVISION OF CORPORATIONS

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*Amend.*  
08/24/07 DC

**COVER LETTER**

**TO: Amendment Section  
Division of Corporations**

**NAME OF CORPORATION: LEFIA & JAZMIN, CORP.**

**DOCUMENT NUMBER: P03000085047**

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**RAUL A CASTILLO**

(Name of Contact Person)

**LEFIA & JAZMIN, CORP.**

(Firm/ Company)

**2022 NW 21 AVENUE**

(Address)

**MIAMI FL 33142 US**

(City/ State and Zip Code)

For further information concerning this matter, please call:

**RAUL A CASTILLO**

(Name of Contact Person)

at ( 786 ) 417-2165

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

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**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Articles of Amendment  
to  
Articles of Incorporation  
of**

LEFIA & JAZMIN, CORP.

(Name of corporation as currently filed with the Florida Dept. of State)

P03000085047

(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:

**NEW CORPORATE NAME (if changing):**

(Must contain the word "corporation," "company," or "Incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")  
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

**(PD) Please change the current (PD) RAUL A CASTILLO**

**14712 SW 63 LN MIAMI FL 33193 US. To the new (PD) SANTOS CASTILLO**

**3614 NW 12TH STREET**

**MIAMI FL 33125 US.**

**Thank you.**

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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The date of each amendment(s) adoption: 08/ 24/ 2007

Effective date if applicable: 08/ 24/ 2007

(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were approved 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 \_\_\_\_\_"  
(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 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)

RAUL A CASTILLO.

(Typed or printed name of person signing)

PD

(Title of person signing)

**FILING FEE: \$35**