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PICK-UP		☐ WAIT		MAIL
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Certified Copies	_	Certificate	es of Stati	ıs
Special Instructions	to Fi	ilina Officer:		
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Office Use Only



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Amns

10 JUN-9 PM 1:25

COVER LETTER

TO: Amendment Section Division of Corporations	
DOCUMENT NUMBER: P-031	(vaine of Corporation)
The enclosed Articles of Execution and f	ee are submitted for filing.
Please return all correspondence concerni	ng this matter to the following:
(Name of Contact Person) Accounting 2 Pauf. S=RUicF S (Firm Company) 329 A FRANKlin st (Address) OCOCE, FR 3476/ (City/State and Zip Code) For further information concerning this manual concerning thi	
England is a shoot for the following amo	· ·
Enclosed is a check for the following amount \$\frac{1}{\sqrt{2}}\$\$ \$35.00 Filing Fee	S43.75 Filing Fee & Certificate of Status
\$43.75 Filing Fee & Certified Copy	\$52.50 Filing Fee, Certificate of Status & Certified Copy
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

Articles of Amendment to

Articles of Incorporation of

	Articles of Inc	•	10 JUN-9 PM 1:25
	of		in . ED
Milton Pai		7701	
(Name of Corpor	ation as currently filed with	the Florida Dept. of	State) 1:25
P 030	00155918		State LAHASSEE. FSTATE
(D	ocument Number of Corpora	tion (if known)	LURIDA
Pursuant to the provisions of sec amendment(s) to its Articles of In		ites, this Florida Pro	ofit Corporation adopts the following
A. If amending name, enter the	new name of the corporati	<u>on:</u>	
name must be distinguishable abbreviation "Corp.," "Inc.," or name must contain the word "cha	Co.," or the designation "C	Corp," "Inc," or "Co	". A professional corporation
B. Enter new principal office ac (Principal office address <u>MUST</u>)			
C. Enter new mailing address, (Mailing address MAY BE A			
D. If amending the registered as			enter the name of the
new registered agent and/or	the new registered office ad	dress:	
Name of New Registered A	<u> </u>		
New Registered Office Ada	lress: (Flor	rida street address)	
			, Florida (Zip Code)
	(City,		(Zip Code)
New Registered Agent's Signatu I hereby accept the appointment as			the obligations of the position.
	Signature of New	Registered Agent, if	changing

removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) Address Type of Action Name VICE- President VicenTE Santilla 1 ☐ Add ☐ Remove ☐ Add E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an 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)

If amending the Officers and/or Directors, enter the title and name of each officer/director being

The date of each amendment	(s) adoption: 06-01-2010
. '	(date of adoption is required)
Effective date it applicable:	(date of adoption is required) 06 -01 - 2010 (no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	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 of for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	east for the amendment(s) was/were sufficient for approval
by	,,
	(voting group)
action was not required.	e adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
action was not required.	
Dated <u>6]1</u>	12010
Signature	The state of the s
	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court
	inted fiduciary by that fiduciary)
•	
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	0 -/ -
	President
	(Title of person signing)