## P0400003417

| (Re                                     | questor's Name)   |             |
|---|-------------------|-------------|
| (Ad                                     | dress)            |             |
| (Ad                                     | dress)            |             |
| (Cit                                    | y/State/Zip/Phone | e #)        |
| PICK-UP                                 | ☐ WAIT            | MAIL        |
| (Bu                                     | siness Entity Nan | ne)         |
| (Do                                     | cument Number)    |             |
| Certified Copies                        | _ Certificates    | s of Status |
| Special Instructions to Filing Officer: |                   |             |
|   |                   |             |
|   |                   |             |
|   |                   |             |

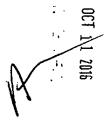




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10/07/16--01025--005 \*\*43.75





## **COVER LETTER**

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION: RICARDO CONSUEGRA INC |   |  |  |  |  |
|--|---|--|--|--|--|
| DOCUMENT NUM                               | DOCUMENT NUMBER: P04000003417   |  |  |  |  |
| The enclosed Articles                      | of Amendment and fee are su   | bmitted for filing.  |  |  |  |
| Please return all corre                    | spondence concerning this ma  | tter to the following:   |  |  |  |
|  | RICARDO P. CONSUEGRA  | 1  |  |  |  |
|  | Name of Contact Person  |  |  |  |  |
|  | RICARDO CONSUEGRA INC   |  |  |  |  |
|  | Firm/ Company   |  |  |  |  |
|  | 15037 SW 67TH LANE  |  |  |  |  |
|  | Address   |  |  |  |  |
|  | MIAMI, FL 33193   |  |  |  |  |
|  |   | City/ State and Zip Code   | <u> </u>   |  |  |
| MAF  | RIA@SUAREZ-BASTER.COI   | М  |  |  |  |
|  | -   | ed for future annual report  | notification)  |  |  |
|  |   |  |  |  |  |
| For further information                    | n concerning this matter, pleas   | e call:  |  |  |  |
| RICARDO P CONSI                            | JEGRA   | 786<br>at (  | 223-7535   |  |  |
| Name of Contact Person                     |   | Area Coo   | de & Daytime Telephone Number  |  |  |
| Enclosed is a check for                    | r the following amount made p   | payable to the Florida Depa  | rtment of State:   |  |  |
| □ \$35 Filing Fee                          | \$43.75 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) |  |  |
| Amo<br>Div<br>P.O                          | endment Section<br>ision of Corporations<br>. Box 6327<br>ahassee, FL 32314 | Amendi<br>Division<br>Clifton<br>2661 Ex                           | Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301  |  |  |

## Articles of Amendment to Articles of Incorporation of

## RICARDO CONSUEGRA, INC

| (Name  | of Corporation as current   | ly filed with the Florida Dept              | t. of State)          |                |
|--|---|---|-----------------------|----------------|
| P0400003417  |   |   | ,                     |                |
|  | (Document Number of   | of Corporation (if known)                   |                       |                |
| Pursuant to the provisions of section 607 its Articles of Incorporation:   | .1006, Florida Statutes, this   | Florida Profit Corporation ac               | dopts the following a | mendment(s) to |
| A. If amending name, enter the new n   | ame of the corporation:   |   |                       |                |
| NOT APPLICABLE   |   |   | $\tau$                | he new         |
| name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations of the contract of t | nation "Corp," "Inc," or  | "Co". A professional corpora                | orated" or the abbi   | reviation      |
| B. Enter new principal office address,   | B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) |   |                       |                |
|  |   |   |                       |                |
|  |   |   |                       | <del></del>    |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  |   | 15037 SW 67TH LANE                          |                       |                |
|  |   | MIAMI, FL 33193                             |                       |                |
|  |   |   |                       |                |
| D. If amending the registered agent ar<br>new registered agent and/or the ne   | id/or registered office add<br>w registered office addres   | <u>ress in Florida, enter the nan</u><br>s: | ne of the             |                |
| Name of New Registered Agent   | SAME  |   |                       |                |
|  | 15037 SW 67TH LANE  |   |                       |                |
|  | (Florida st   | reet address)                               |                       |                |
| New Registered Office Address:   | MIAMI   |   | , Florida             |                |
|  |   | (City)                                      | (Zip Coa              | le)            |
|  |   |   |                       |                |
| New Registered Agent's Signature, if c   | HERE THE ISTOREG ALCON  | <u></u>                                     |                       |                |
| I hereby accept the appointment as regist  | ered agent. I am familiar   | with and accept the obligation.             | •                     | <b>1</b> 2     |
|  |   |   | fn                    |                |
|  |   |   | 2.25                  | guan           |
|  | Signature of New I  | Registered Agent, if changing               |                       | - Interest     |
|  |   |   |                       | The second     |
|  |   |   | Part of the second    | 4.2.2.4        |

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:

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, Sally 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                   | <u>PT</u>    | John Doe            |                    |
|----------------------------|--------------|---------------------|--------------------|
| X Remove                   | <u>v</u>     | Mike Jones          |                    |
| X Add                      | <u>sv</u>    | Sally Smith         |                    |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u>         | <u>Addres</u> s    |
| 1) Change                  | VP           | ADOLFO A. CONSUEGRA | 15037 SW 67TH LANE |
| X Add                      |              |                     | MIAMI, FL 33193    |
| Remove                     |              |                     |                    |
| 2) Change                  | s            | YANDRY RODRIGUEZ    | 15037 SW 67TH LANE |
| X Add                      |              |                     | MIAMI, FL 33193    |
| Remove                     |              |                     |                    |
| 3) Change                  |              |                     |                    |
| Add                        |              |                     |                    |
| Remove                     |              |                     |                    |
| 4) Change                  |              |                     |                    |
| Add                        |              |                     |                    |
| Remove                     |              |                     |                    |
| 5) Change                  |              |                     |                    |
| Add                        | <del></del>  |                     |                    |
| Remove                     |              |                     |                    |
|                            |              |                     |                    |
| 6) Change                  |              |                     | <del> </del>       |
| Add                        |              |                     |                    |
| Damoua                     |              |                     |                    |

| E. If amending or adding additional Arti<br>(Attach additional sheets, if necessary). | (Be specific)   |
|---|---|
| NONE  |   |
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| E 16  |   |
| provisions for implementing the ame   | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| (if not applicable, indicate N/A)   |   |
| 80% STOCK: RICARDO P. CONSUEGI  | RA  |
| 10% ADOLFO A. CONSUEGRA   |   |
| 10% YANDRY RODRIGUEZ  |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
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|   |   |

| •  | OCTOBER 1, 2016   |                                   |
|--|---|-----------------------------------|
| The date of each amendment (date this document was signed. | s) adoption:  | , if other than the               |
| _  | OCTOBER 1, 2016   |                                   |
| Effective date if applicable:                              | (no more than 90 days after amendment file date)  |                                   |
|  | nis block does not meet the applicable statutory filing requirements, the Department of State's records.  | is date will not be listed as the |
| Adoption of Amendment(s)                                   | (CHECK ONE)   |                                   |
| The amendment(s) was/were by the shareholders was/were     | adopted by the shareholders. The number of votes cast for the amendme sufficient for approval.  | ent(s)                            |
|  | approved by the shareholders through voting groups. The following state of the following state of the amendment of the separately on the amendment (s): |                                   |
| "The number of votes                                       | cast for the amendment(s) was/were sufficient for approval  |                                   |
| by   | "  (voting group)   |                                   |
|  | (voting group)  |                                   |
| The amendment(s) was/were action was not required.         | adopted by the board of directors without shareholder action and sharel   | nolder                            |
| ☐ The amendment(s) was/were action was not required.       | adopted by the incorporators without shareholder action and shareholder   | r                                 |
| 10/03/   | 2016  |                                   |
| Dated  | S t i A   |                                   |
| Q:   | Poul  |                                   |
| Signature  | a director, president or other officer – if directors or officers have not by   | een                               |
| sel  | ected, by an incorporator - if in the hands of a receiver, trustee, or other  |                                   |
| ар   | pointed fiduciary by that fiduciary)  |                                   |
|  | RICARDO P CONSUEGRA   |                                   |
|  | (Typed or printed name of person signing)   | <del> </del>                      |
|  | PRESIDENT   |                                   |
|  | (Title of person signing)   |                                   |