P04000012562

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Ви	siness Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates of Status	
Special instructions to	Filing Officer:	

Office Use Only



500029847435

03/08/04--01032--012 **35.00

04 MAR -8 PM 3: 55

AMENDE !!

TRANSMITTAL LETTER

TO: Amendmen Division of	t Section Corporations	BITACHER	
SUBJECT:	CHNGE HOTEL	DOREN OF PRES	Resilong Abor
DOCUMENT N	Do 40	0001562	·
The enclosed Ar	ticles of Amendment and fee ar	e submitted for filing.	
Please return all	correspondence concerning this	s matter to the following:	
	LOURSES 2	AYEI- PRES	
	(Nai	me of Person)	
	LMZ ER	TENPAUS INC	
	•	f Firm/ Company)	
	14358 A No. MIBMI B	BISOTNE BL	Sp
		(Address)	
	No. MIONI B	iert taring	33181
~_	(City/ St	ate/ and Zip Code)	
For further infor	mation concerning this matter,	please call:	
Countes	2445	at (305) 9	40-7715
	(Name of Person)	(Area Code & Daytim	ne Telephone Number)
Enclosed is a ch	eck for the following amount:		
□ \$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)
	Address	Street Address	
Amendment Section		Amendment Section Division of Corporations	
Division of Corporations P.O. Box 6327		409 E. Gaines Street	

Tallahassee, FL 32399

Tallahassee, FL 32314

1111

Articles of Amendment

to
Articles of Incorporation
of

LMZ ENTERPRISES INC.	*·
(Name of corporation as currently filed with the Florida Dept. of State)	
P.040000/156V	5 E
(Document number of corporation (if known)	· ·
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation:	団
NEW CORPORATE NAME (if changing):	
(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")	يون المراجعة المراجع
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s)	
ANTEXPRIENTS ADOFTED (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) CHONGE HOME POPESS: OF OFFICER LOUNDES Z-BY B to 14358 BISCOPN No. Mini Barry From PA 33181.	• •
CABOGE II HUVEST OF OFFICER	, r e r − 10
Lounder 2040 to 14358 BISCOGN	e BLOD
No. Mini Berry Fromph 33181.	
CHONGE RESIDENT AGENT HARDONEU TO 14358 BISCOMNE BLUR No. 1710MI BEACH FLORIDA 33181	· · · · · · · · · · · · · · · · · ·
14358 BISCALLE BLUR No. 1710M	
BEACH FLORIDO 33181	• ** . 15/7
	e esta gara
The second secon	
(Attach additional pages if necessary)	. *, +s र्न-
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provision for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate No	
· · · · · · · · · · · · · · · · · · ·	wine
-	· ·
The second secon	

(continued)

The date of each amendment(s) adoption: February 19, 2004
Effective date if applicable: (no more than 90 days after amendment file date)
(20 - 100 - 1
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.
Signed this 19 day of February 2004
Signature Londy Duy (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)
(Typed or printed name of person signing)
PREJ (Title of person signing)

FILING FEE: \$35