# P040000368666

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SECRETARY OF STATE ON IT A PLASSEF, FLORID.



# TRANSMITTAL LETTER

TO: Amendment Section **Division of Corporations** 

SUBJECT:	ARTEMISA TRANSFER	CORP	
DOCUMENT N	UMBER:	}	
The enclosed Art	icles of Amendment and fee a	re submitted for filing.	
Please return all	correspondence concerning thi	s matter to the following:	
	Luis A Lle	erena	
· <del></del>		me of Person)	
	(Name o	of Firm/ Company)	
	·	21st Street	
		(Address) Florida 33013	
· <u>.</u>	(City/ St	ate/ and Zip Code)	· .
For further inform	nation concerning this matter,	please call:	<i>3</i> 699
Lui	s A Llerena	at ( 305 ) 804- (Area Code & Daytime	5585
	(Name of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a che	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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399	

May 12, 2004

LUIS A. LLERENA 832 EAST 21ST STREET HIALEAH, FL 33013

SUBJECT: ARTEMISA TRANSFER CORP

Ref. Number: P04000036866

We have received your document for ARTEMISA TRANSFER CORP and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE AMENDMENT DOCUMENT IS INCOMPLETE. THE TRANSMITTAL LETTER AND THE SECOND PAGE OF THE AMENDMENT WERE RECEIVED, HOWEVER PAGE ONE OF THE AMENDMENT IS MISSING. PLEASE RETURN THE COMPLETE AMENDMENT,

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 245-6880.

Karen Gibson Document Specialist

Letter Number: 004A00033184

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## Articles of Amendment to Articles of Incorporation of

### ARTEMISA TRANSFER CORP

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

### P04000036866

(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): ARTEMISA SEAFOOD CORP (must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) (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)

The date of each amendment(	s) adoption: 05-03-2004
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	was/were approved by the shareholders. The number of votes cast for the shareholders was/were sufficient for approval.
	was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote pendment(s):
"The number of	votes cast for the amendment(s) was/were sufficient for approval by
	(voting group)
The amendment(s) wand shareholder action	was/were adopted by the board of directors without shareholder action on was not required.
☐ The amendment(s) we shareholder action we	vas/were adopted by the incorporators without shareholder action and vas not required.
Signed this <u>03</u> day of	May 2004
Signature	
(By a di selecte	rector, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	Luis A Llerena
<u></u>	(Typed or printed name of person signing)
	President/ Director
	(Title of person signing)

FILING FEE: \$35