Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000272165 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number ; (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

Phone

: (305)552-5973

: (305)675-5944 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		 	

COR AMND/RESTATE/CORRECT OR O/D RESIGNS R. LAGO CORPORATION

Ecrtificate of Status 0 0 Etrified Copy 05 age Count timated Charge \$35.00

C. GOLDEN

OCT 1 8 2017

Electronic Filing Menu

Corporate Filing Menu

Help

2ND REQU

850~617~6381

3052201440

10/17/2017 10:40:52 AM PAGE 1/001 Fax Server



October 17, 2017

FLORIDA DEPARTMENT OF STATE Division of Corporations

R. LAGO CORPORATION 684 DELMONICO STREET LEHIGH ACRES, FL 33974US

SUBJECT: R. LAGO CORPORATION

REF: P04000045434

We received your electronically transmitted document. Kowever, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.

http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abb reviations/

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II FAX Aud. #: H17000272165 Letter Number: 117A00020899



H170002721657 AMIO: 17

4-4-6			25.11.6	** :
SECO	والشير	1.11	> 1/2	. i t
TA1 1 1	41 00		1 00	une
TALLAS	ハンンロ	. r r	'L.Ur	ν
				-
- H-R				

	Articles of Amendment	2000 1 1 2 2 2 2 1 1 2 1 2 1 1 1 2 1 1 1 2 1 1 1 2 1 1 1 1 2 1 1 1 2 1
	to Articles of Incorporation	SENA NAN DA STA TALLAHASSEE, FLOI
•	of	Williams
	R. LAGO CORPORATION	
(Name of Co	exporation as currently filed with the Florid	n Deut. of State)
	P04000045434	
	(Document Number of Corporation (if known)
Pursuant to the provisions of section 607,1006 its Articles of Incorporation:	, Florida Statutes, this <i>Florido Profit Corpora</i>	tion adopts the following amendment(s)
A. If amending name, enter the new name,	of the corporation:	
		The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	i "Corp," "Inc," or "Co". A professional c	ncorporated" or the abbreviation orporation name must contain the
B. Enter new principal office address. If an (Principal office address MUST BE A STRE		
		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		
	<u></u>	
D. If amending the registered exent and/or new registered agent and/or the new reg	registered office address in Florida, enter ti istored office address:	e name of the
Name of New Registered Agent		
<u> </u>	<u> </u>	
	(Mortda street address)	
New Registered Office Address:		, Plorida
	(City)	(Zip Cods)
·		
New Registered Agent's Signature, if chang I hereby accept the appointment as registered		zations of the position.
	Stonature of New Registered Agent, if chara	Ø(113

3052201440

417000272145

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, Salty 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	T	John Dos	
X Remove	<u>v</u>	Mika Jones	
_X Add	<u>\$</u> Y	Sally Smith	
Type of Action (Check One)	Title	Name	Address
i)Change	<u>S</u>	reyes, luis felipe	917 HUDSON AVE
X Add			LEHIGH ACRES, FL 33936
Remove			
2) Change			
Add			
Remove			
3)Change	•••		
Add		,	· · · · · · · · · · · · · · · · · · ·
Removė			
4) Change			
Add			
Remove		•	<u> </u>
5)Change	<u></u>		
Add			
Remove			
6) Change			
Add			
Remove			
		Page 2 of 4	#17000272165

H17000272165

	(Be specific)		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		•	
·	****		<u> </u>
		,	
··		•	
<u> </u>			
<u> </u>			
		Transaction of the second of t	
an amendment provides for an exchanguishing the amen (if not applicable, indicate N/A)	ings, reclassification, or caucella dinent if not contained in the am	ion of issued shares, adment itself:	
an amondment provides for an exchange of the amen (if not applicable, indicate N/A)	ings, reclassification, or caucellat dinent if not contained in the am	ion of issued shures. Inducent itself:	
an amendment provides for an excharovisions for implementing the amen (if not applicable, indicate N/A)	ings, reclassification, or caucella dinent if not contained in the am	ion of issued shures, indment itself:	
an amendment provides for an excharovisions for implementing the amen (if not applicable, indicate NIA)	ings, reclassification, or caucella dinent if not contained in the am	ion of lestied shures, adment itself:	
an amendment provides for an exchanguishing the amen (if not applicable, indicate N/A)	ings, reclassification, or cancellated in the am	ion of issued shures. Inducent itself:	
an amendment provides for an excharaction for inntendenting the amen (if not applicable, indicate N/A)	ings, reclassification, or caucellal dinent if not contained in the sm	ion of lesued shares, and ment itself:	
an amendment provides for an exchi- rovisions for implementing the amen (if not applicable, indicate N/A)	ings, reclassification, or cancellated in the amount of th		
an amendment provides for an excharovisions for implementing the amen (if not applicable, indicate N/A)	ings, reclassification, or caucellal		

H17000272165

The date of each smendment(s) adoption:	if other than
date this document was signed.	
Effective date [[applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	s, this date will not be listed as t
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the anxe by the shareholders was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment.	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	•
(voling group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	areholder
The gmendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	older
Signature to Cal	
(By a discour, president or other officer – if directors or officers have n	
selected, by an incorporator — if in the hands of a receiver, trustee, or of appointed fiduciary by that fiduciary)	her court
RAFAEL LAGO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

H17000272165