P34000H9565

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	

Office Use Only



800148514328



04/10/09--01022--003 **52.50

FILED
2009 APR 10 PM 4: 11
SECRETARY OF STATE

KARON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: $THE \Theta$	RBONG COMPANY
DOCUMENT NUMBER:	-
The enclosed Articles of Amendment and fee are sub	mitted for filing.
Please return all correspondence concerning this matt	er to the following:
DENNIS AND (Name of Cont	2000 . act Person)
THE ARRIVE	npany)
P.O. Box 398072 (Addre	ess)
MIAMI BEACH F (City/ State and	<u> </u>
For further information concerning this matter, please	e call:
(Name of Contact Person)	at (30 5) 43 9 - 100 6 . (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Department of State:
	\$43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2009 APR 10 PM 4: 11

(Name of Corporation as c		<u>(Om Pみんり)</u> ith the Florida Dep	
(Document)	Number of Corpo	oration (if known)	•
suant to the provisions of section 607. owing amendment(s) to its Articles of In		tatutes, this <i>Florida</i>	Profit Corporation adopts
If amending name, enter the new nam	ne of the corpor	ation:	
new name must be distinguishable corporated" or the abbreviation "Corpo". A professional corporation rociation," or the abbreviation "P.A."	p.," "Inc.," or	Co.," or the design	ation "Corp," "Inc," or
Enter new principal office address, if incipal office address MUST BE A STE			
•			
Enter new mailing address, if applica (Mailing address MAY BE A POST Of			
			
If amending the registered agent and/ new registered agent and/or the new i			ida, enter the name of the
Name of New Registered Agent:			
New Registered Office Address:		lorida street address	<u> </u>
			, Florida
		(City)	(Zip Code)
w Registered Agent's Signature, if cha ereby accept the appointment as regist ition.			d accept the obligations of
	Signature of i	New Registered Agen	at, if changing

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>VP</u>	TERESITA ARBONA	201 JEFFERSON AVE Nº10 MIAMIBEACH PL 331	Add Remove
FC_	TERESTIA ARBONA		Add Remove
			Add Remove
	· · · · · · · · · · · · · · · · · · ·		
provi	amendment provides for an exchange, recisions for implementing the amendment if for applicable, indicate N/A)		

The date of each amendment(s) adoption: 03/01/2009	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted 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 stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
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.	
Dated 03/05/2009	
Signature (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)	
(Title of person signing)	



Registered Agent:

Dennis Arbona 25 SE 2nd Ave #426 Miami Florida 33131

President:

Dennis Arbona

Vice President:

Teresita Arbona

Secretary:

Teresita Arbona

Director:

Dennis Arbona

Incorporator:

Dennis Arbona

Name of Shareholders:

Dennis Arbona 40% Teresita Arbona 60%