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TRANSMITTAL LETTER

TO: Amendment Section

Amendment Section
Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations
SUBJECT: New Corporate NAME
DOCUMENT NUMBER: PO 40000 69 198
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ezequie Mosica (Name of Person)
(Name of Person)
LA COLONIA/ FINANCIA/ SENVICES
2289 NW 28 ST SUITE 17
MIAMI, FL. 33142 (City/ State/ and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (786) 355-1162 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \(\text{Certificate of Status} \) \(\text{Certified Copy} \) \(\text{Solutional Copy} \) \(\text{is enclosed} \)
Mailing Address Street Address

Amendment Section

Division of Corporations 409 E. Gaines Street

Tallahassee, FL 32399

The date of each amendment(s) adoption: 05/20/04
Effective date if applicable: (no more than 90 days after amendment file date)
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 20 day of MAY, 2004. Signed this Eals LANCI
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)
EglyS LAREZ
(Typed or printed name of person signing)
President
(1 ttle of person signing)

FILING FEE: \$35