

P04.000113452

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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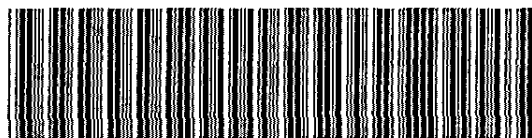
(Business Entity Name)

(Document Number)

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FILED
05 APR 13 PM 4:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4-13
APR 13 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SABOR LATINO PRODUCT INC.
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

EDITH NAVARRO

(Name of Person)

SABOR LATINO PRODUCT INC

(Firm/Company)

1170 SW 6 Street

(Address)

MIAMI FLA 33130

(City/State and Zip Code)

For further information concerning this matter, please call:

Edith Navarro

(Name of Person)

at (305) 860-6548

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 6, 2005

SABOR LATINO PRODUCT INC
% EDITH NAVARRO
1170 SW 6TH STREET
MIAMI, FL 33130

SUBJECT: SABOR LATINO CONDOM, INC.
Ref. Number: P04000113452

We have received your document for SABOR LATINO CONDOM, INC. and check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing the proper form(s) with instructions for your convenience.

The fee is \$35.00. Please remit an additional \$5.00.

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) 245-6908.

Anna Chesnut
Document Specialist

Letter Number: 105A00023393

RECEIVED
05 APR 13 AM 8:41
DIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SABOR LATINO CONDOM INC.

DOCUMENT NUMBER: P04000113452

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

EDITH NAVARRO

(Name of Contact Person)

NAVARRO BUSINESS OFFICE

(Firm/ Company)

1170 SW 6 Street

(Address)

MIAMI FLA 33130

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

EDITH NAVARRO

at (305) 860-6548

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check 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

Articles of Amendment
to
Articles of Incorporation
of

SABOR LATINO CONDOM INC

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

P 04000113452

(Document number of corporation (if known))

FILED
05 APR 13 PM 11:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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):

SABOR LATINO PRODUCT INC.

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

n/a

(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)

n/a

The date of each amendment(s) adoption: April 10, 2005

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 10 day of April, 2005.

Signature Edith Navarro
(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)

EDITH NAVARRO
(Typed or printed name of person signing)

PRESIDENT (Owner)
(Title of person signing)

FILING FEE: \$35