Electronic Filing Cover Shect

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.

(((H040001955373)))

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)205-0380

From:

Account Name

: EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 120000000146

Phone

: (305)444-4994

Fax Number

: (305) 444-4977

BASIC AMENDMENT

LA FONTAINE PARIS, INC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing

Public Access Help

https://efile.sunbiz.org/scripts/efilcovr.exe

9/30/2004

(((H04000195537)))

Articles of Amendment		
to		
Articles of Incorporation		·
of		
LA FONTAINE PARIS, INC		宝 岛
(Name of corporation as currently filed with the Florida Dept. of State)		<u> </u>
		32 O
P04000 119375		FOR PR
(Document number of corporation (if known)		FLO FLO
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:		% 50 TATE OR:DA
NEW CORPORATE NAME (if changing):		
(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)		
The principal, mailing, registered agent and		.
officers address will be as follows:		
Clo Glinsky		
169 E. Flagler Street Suite 1118	. *	
Miami FL 33131		
1.1011.11	•	
e de la companya del companya de la companya de la companya del companya de la companya del la companya de la c		44 4
	. *	
(Attach additional pages if necessary)		
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provision	e.	
for implementing the amendment if not contained in the amendment itself; (if not applicable, indicate No		
	•	
		-
		•
No. of the control of		
(continued)		

(((H04000195537)))

FILING FEE: \$35