

P04000121679

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

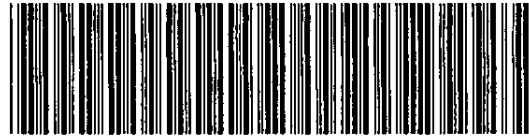
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
MAR 18 PM 3:32

Amd

MAR 20 2013

R. WHITE

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: AGORA INTERNATIONAL ENTERPRISES CORP

DOCUMENT NUMBER: P04000121679

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

Please return all correspondence concerning this matter to the following:

ELECTO ABEL PEREZ

(Name of Contact Person)

(Firm/ Company)

1462 E 4 AVE

(Address)

HIALEAH, FL 33010

(City/ State and Zip Code)

trinidadinvestment@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Electo A Perez

(Name of Contact Person)

at ( 786 ) 853-9659

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|--|---|---|--|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 6, 2013

EDECTO ABEL PEREZ  
AGORA INTERNATIONAL ENTERPRISES CORP  
1462 E 4 AVE  
HIALEAH, FL 33010

SUBJECT: AGORA INTERNATIONAL ENTERPRISES CORP  
Ref. Number: P04000121679

We have received your document for AGORA INTERNATIONAL ENTERPRISES CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6820.

Rebekah White  
Regulatory Specialist

Letter Number: 813A00005298



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 6, 2013

EDECTO ABEL PEREZ  
AGORA INTERNATIONAL ENTERPRISES CORP  
1462 E 4 AVE  
HIALEAH, FL 33010

SUBJECT: AGORA INTERNATIONAL ENTERPRISES CORP  
Ref. Number: P04000121679

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Rebekah White  
Regulatory Specialist

Letter Number: 813A00005298

RECEIVED  
13 MAR 18 PM 12:13  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
13 MAR 18 PM 3:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Agora International Enterprises Corp**

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

**P04000121679**

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**  
(Principal office address **MUST BE A STREET ADDRESS**)

**1462 E 4 AVE**  
**HIALEAH, FL 33010**

**C. Enter new mailing address, if applicable:**  
(Mailing address **MAY BE A POST OFFICE BOX**)

**trinidadinvestment@hotmail.com**

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

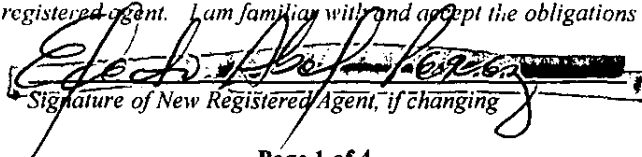
*Name of New Registered Agent:* **Educto A Perez**  
**3981 NW 175 ST MIAMI FL 33055**  
(Florida street address)

*New Registered Office Address:*

**1462 E 4 AVE HIALEAH**, Florida **33010**  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

  
Signature of New Registered Agent, 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)

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, Sally 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.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>MENDOZA, HERNAN</u>	<u>20341 NE 30 AVE # 122</u> <u>AVENTURA, FL 33180</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>PEREZ, EDECTO A</u>	<u>3981 NW 175 ST</u> <u>MIAMI, FL 33055</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____



The date of each amendment(s) adoption: 01/09/2013

Effective date if applicable: 01/09/2013  
(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 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.

Dated 01/09/2013

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)

ORLANDO CUELLO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)



