P04000138984

(Requestor's Name)	
(Address)	į
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 1, 2011

BERNARDO DE LA ESPRIELLA JARAMILLO ESPRIELLA HOLDINGS, INC. 9990 NW 14TH ST., SUITE 110 MIAMI, FL 33172

SUBJECT: JARAMILLO ESPRIELLA HOLDINGS, INC.

Ref. Number: P04000138984

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

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

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) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 011A00005024

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Jaromillo Espriella. Holdings, Inc
DOCUMENT NUMBER: P 04000 138984
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Bernoido De 19 Espriello. Name of Contact Person
Jaromillo Espriella Holdings, Inc.
9990 NW 14th st suite 110 Address
Hiami, Fl 33172 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Bernardo De la Espriella at (305) 597-9798. Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
□\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment tổ

Articles of Incorporation

	of		
Jaramillo Espriel	119 Holdings,	INC.	
(Name of Corporation as curre	ntly filed with the Florida Dep	ot. of State)	
P04000138984			
	ber of Corporation (if known)		
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	i, Florida Statutes, this Florida	Profit Corporation a	dopts the following
A. If amending name, enter the new name of	the corporation:		
De la Espriella H	toldings, inc.		The new
name must be distinguishable and contain to abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "prof	designation "Corp," "Inc," or	"Co". A professiona	
B. Enter new principal office address, if appl	icable:	· · · · · · · · · · · · · · · · · · ·	5-14
(Principal office address MUST BE A STREE		ų.	
			8 7
C. Enter new mailing address, if applicable:			3
(Mailing address <u>MAY BE A POST OFFIC</u>	<u></u>		ين ين
	·		P
D. If amending the registered agent and/or re	egistered office address in Flor	ida, enter the name o	of the
new registered agent and/or the new regis			
Name of New Registered Agent:			
New Registered Office Address:	(Florida street addres	<u> </u>	
•	•	Florida	
-	(City)	, Florida (Zip Code)	
Non-Barbara d Annada Cianadana 26 da anta	- Donintourd Acoust	•	

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) <u>Title</u> Name Address **Type of Action** ☐ Add ☐ Remove ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an 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)

The date of each amendment	(s) adoption: (date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s)
	re approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):
"The number of votes	east for the amendment(s) was/were sufficient for approval
by	(voting group)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated <u>O</u> Signature (By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court
	pinted fiduciary by that fiduciary)
	Bernardo Re la Espriella (Typed or printed name of person signing)
	President. (Title of person signing)