

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0380

From:

Account Name : INDEPENDENT TAX SERVICE
Account Number : 120020000072
Phone : (305) 887-0001
Fax Number : (305) 884-6444

BASIC AMENDMENT

LAKES BAKERY, INC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

RECEIVED
05 OCT 31 AM 8:00
DIVISION OF CORPORATIONS

FILED
05 OCT 31 PM 2:32
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LAKES BAKERY, INC

DOCUMENT NUMBER: P05000020061

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

Please return all correspondence concerning this matter to the following:

MILAGROS CASTRO

(Name of Person)

LAKES BAKERY, INC.

(Name of Firm/ Company)

6440 NW 186 STREET

(Address)

MIAMI, FLORIDA 33014

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

MILAGROS CASTRO

(Name of Person)

at (305) 821-8492

(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

LAKES BAKERY, INC.

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

P050000020061

(Document number of corporation (if known))

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):

(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)**

ARTICLE VII: The initial officer(s) and/or director(s) of the corporation is/are:

DELETE: CHAISER, ANNIE-6781 PARKISONIA DR HIALEAH, FL. 33014-PRESIDENT

ADD: ROSEMARIE CARRION -P-6781 PARKISONIA DR HIALEAH, FL. 33014-PRESIDENT

ADD: ANNIE CHAISER -6781 PARKISONIA DR HIALEAH, FL. 33014-V/PRESIDENT

ADD: OSCAR E CASTRO - 6781 PARKISONIA DR HIALEAH, FL. 33014-S/T

ARTICLE V: THE NAME AND FLORIDA STREET ADDRESS OF THE REGISTERED AGENT IS

DELETE: CHAISER, ANNIE- 6781 PARKISONIA DR HIALEAH, FL 33014

ADD: MILAGROS CASTRO-6781 PARKISONIA DR HIALEAH, FL. 33014

(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)

(continued)

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TALLAHASSEE FLORIDA

The date of each amendment(s) adoption: 10/31/2005

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 31 day of OCTOBER, 2005

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)

MILAGROS CASTRO

(Typed or printed name of person signing)

REGISTERED AGENT

(Title of person signing)

FILING FEE: \$35

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE**

LAKES BAKERY, INC.

Pursuant to Florida status Section 48.091 and 607.0501. The following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of incorporation at
6440 NW 186 STREET
MIAMI, FLORIDA 33014

Has named **MILAGROS CASTRO**. As registered agent to accept service of process within the State.

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificated, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provision of all relating the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

10/31/2005

Date


MILAGROS CASTRO