(Re	equestor's Name)	
(Ad	ldress)	,
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
		:
	•	

Office Use Only



500079676025

09/18/06--01026--004 \*\*35.00

O6 SEP 18 PM 3: 04
TALLAHASSEE, FLORIDA

PS 5/15/00 Ameno

## **COVER LETTER**

Division of Corporations
NAME OF CORPORATION: Advancedata Processing, J
DOCUMENT NUMBER: P0500058793
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Angel Muguerza (Name of Contact Person)
Advancedata Processing, INC
814 SW 9TH Are Swite#4
Mauri FL 33130 (City/ State and Zip Code)
For further information concerning this matter, please call:
Angel Nuguer2a at (786) 486-0189 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee \& Certificate of Status \$\bigcup \\$43.75 Filing Fee \& Certified Copy \$\bigcup \\$643.75 Filing Fee \& Certified Copy \$\big

## **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

grands .
Articles of Amendment
Articles of Amendment to to OSEP 18 PM 3: 04
of SECRETARY DE
Advancedata ProcessiviosEFTIME.
(Name of corporation as currently filed with the Florida Dept. of State)
P 05000050200
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> dopts 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.")  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)
nd/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Please make the following
That the following
Chauges!
Add. Antonela Blanc is the
President of Alle Incorporation.
Trestation.
Antonela Blanc = President
(Attach additional pages if necessary)
f an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions
or implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
·
<u> </u>
(continued)
(continued)

The date of each amendment(s) adoption: $09/12/06$
Effective date if <u>applicable</u> : 09/12/06 (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.
Signature  Angel Muguerza  (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)  ANGEL MUGUERZA  (Typed or printed name of person signing)
W. President
(Title of person signing)

FILING FEE: \$35