# P05000060761

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Ви	isiness Entity Na	me)
(Do	ocument Number	) .
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
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## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATIO	TION: REMOLINO STUCCO, INC.					
DOCUMENT NUMBER: _	MBER:P05000060761					
The enclosed Articles of Am	ed Articles of Amendment and fee are submitted for filing.					
Please return all corresponde	l correspondence concerning this matter to the following:					
	JUAN SAI	NTAELLA				
1	Name of Contact Person					
and the growing of		STMENT INC.				
	Firm/ Co		<del></del>			
	·					
	2310 W WAT					
	Add	ress				
•	•	,				
	TAMPA F	L 33604				
· · · · · · · · · · · · · · · · · · ·	<del></del>					
	City/ State ar	ia Zip Code				
	INFO@PASAN-SER	RVICES.COM				
E-m	ail address: (to be used for future	annual report notification)	<del></del>			
For further information conc	<u> </u>					
JUAN SAN	AELLA at (	813	9-2878			
Name of Contact	Person	Area Code & Daytime Tele	phone Number			
Enclosed is a check for the for	ollowing amount made paya	ble to the Florida Departr	nent of State:			
	ficate of Status C	13.75 Filing Fee & ertified Copydditional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address	54	oot Addross				
Mailing Address  Amendment Section		Street Address				
_ ·		Amendment Section				
P.O. Box 6327	Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building					
Tallahassee FL 3231		ion Building 1 Executive Center Circle				
19119098888 81 3/31	<u>.</u> /nn	TEXTERMINE LEMENT OF STATE				

Tallahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 22, 2010

JUAN SANTAELLA 2310 W WATERS STE D TAMPA, FL 33604

SUBJECT: REMOLINO STUCCO, INC.

Ref. Number: P05000060761

We have received your document for REMOLINO STUCCO, INC. 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The above listed corporation was administratively dissolved or its certificate of authority was revoked for failure to file its 2006 corporate annual report form. To reinstate, the corporation must submit a completed reinstatement application/annual report and the appropriate fees.

The fees to reinstate the corporation are as follows: \$600.00 reinstatement fee, \$150.00 filing fee per year for each year the corporation has been dissolved.

Therefore, the total amount due to reinstate the corporation is \$1200.00. Add an additional \$8.75 for each certificate of status requested.

The total amount due includes the 2010 Annual Report and Supplemental Fee.

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) 245-6957.

Tracy Lemieux Regulatory Specialist II

Letter Number: 910A00015331

#### **Articles of Amendment** to **Articles of Incorporation** of

## REMOLINO STUCCO, INC.

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

F	050000607	61		
(Document	)			
Pursuant to the provisions of section 607.  amendment(s) to its Articles of Incorporation		atutes, this <i>Flori</i>	ida Profit Corporation add	opts the follo
A. If amending name, enter the new nan	ne of the corpor	ation:		
	N/A			_The new
name must be distinguishable and conto abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "	the designation	"Corp," "Inc,"	or "Co". A professional	
B. Enter new principal office address, if		<u>N/A</u>		_
(Principal office address <u>MUST BE A STI</u>	<u>REET ADDRES:</u>	<u>s</u> ) <u>N/A</u>		
		N/A		
C. Enter new mailing address, if applica (Mailing address MAY BE A POST O		N/A	* * * * * * * * * * * * * * * * * * * *	
		N/A N/A		<u> </u>
D. If amending the registered agent and new registered agent and/or the new			lorida, enter the name of	<u>the</u>
Name of New Registered Agent:	N/A			
	N/A			
New Registered Office Address:	(F	ilorida street add	ress)	
Separation (Separation ) separation supportunities separation supportunities supp	N/A		, Florida	بالله بيوا ، فهيم
	(C	City)	(Zip Code)	
New Registered Agent's Signature, if cha I hereby accept the appointment as register			accept the obligations of the	he position.
	Signature of I	Vew Registered A	gent, 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) , , i <u>d</u> **Title Type of Action Name** Address ELIAS MENDEZ ☑ Add 1606 W POINSETTIA AVE TAMPA, FL 33612 ☐ Remove ☐ Remove E.-If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) N/A 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 if applicable:  (no more than 90 days after amendment file date)
(no more man ye daya aye, amenamen yile 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
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_JUNE 14, 2010
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)
ANTONIO MENDEZ
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)