

P05000103894

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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☐

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(Business Entity Name)

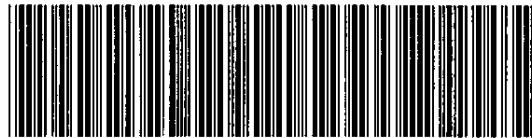
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09 JUN 30 AM 10:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Amend*  
C.COULLETTE

JUL 07 2009

EXAMINER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Chago Dairy Inc.

**DOCUMENT NUMBER:** P05000103894

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

Please return all correspondence concerning this matter to the following:

Jorge L. Santiago

Name of Contact Person

Firm/ Company

7471 W 34 Lane

Address

Hialeah, FL 33018

City/ State and Zip Code

mattei4903@bellsouth.net

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

For further information concerning this matter, please call:

Jorge L. Santiago

Name of Contact Person

at ( 786 )

286-9265

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 &  
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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

Chago Dairy Inc.

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

P05000103894

(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:

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

*The new*

*name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

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

1076 West 44 Street

Hialeah, FL 33012

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

7471 W 34 Lane

Hialeah, FL 33018

**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:

Jorge L. Santiago

New Registered Office Address:

1076 West 44 Street

(Florida street address)

Hialeah

(City)

Florida 33012

(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

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**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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	Santiago, Heriberto	148 Truxton Drive Miami Springs, FL 33166	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
P	Santiago, Jorge L.	1076 W 44 Street Hialeah, FL 33012	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
S	Santiago, Heriberto	148 Truxton Drive Miami Springs, FL 33166	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

S	Santiago, Jorge L.	1076 W 44 Street, Hialeah, FL 33012	X Add
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**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: 05/30/2009  
(date of adoption is required)  
Effective date if applicable: 05/30/2009  
(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 05/30/2009

Signature Heriberto Santiago  
(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)

Heriberto Santiago  
(Typed or printed name of person signing)

President  
(Title of person signing)

Dated 05/30/2009

Signature



(By a new president – accepting new position – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Jorge L. Santiago

(Typed or printed name of person signing)

President

(Title of person signing and accepting new position)

STATE OF FLORIDA )

) SS

COUNTY OF DADE )

The foregoing instrument was acknowledged before me this 05/30/2009 by Jorge L. Santiago and Heriberto Santiago, who are personally known to me.



ROBERTO MATTEI  
MY COMMISSION # DD 546030  
EXPIRES: May 27, 2010  
Bonded Thru Budget Notary Services



Notary Public-State of Florida

My commission expires: