

P05000147470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

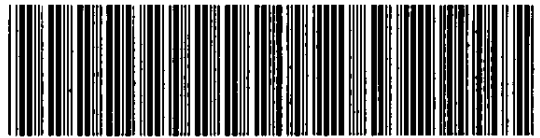
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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Amend

05/04/10--01014--015 **35.00

2010 JUN -3 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

*00789, 00721, 00524, 00671

DR
6/7/10



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 11, 2010

Miguel A. Claros
C & D Claros Designs Corp.
392 SW Cherryhill Road
Port St. Lucie, FL 34953

Copy from you

SUBJECT: C & D CLAROS DESIGNS CORP.
Ref. Number: P05000147470

We have received your document for C & D CLAROS DESIGNS CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

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) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 910A00011800

5/06/10
NUM: P05000147470 ST: FL ACTIVE/FL PROFIT
FEI#: 20-3735053
NAME : C & D CLAROS DESIGNS CORP.
PRINCIPAL: 2603 NW 10TH AVE
ADDRESS SUITE 306
MIAMI, FL 33127
RA NAME : CLAROS, MIGUEL A A
RA ADDR : 2603 NW 10TH AVE

spaces

CORPORATE DETAIL RECORD SCREEN
FLD: 11/03/2005

4:29 PM

CHANGED: 03/12/07

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: C & D CLAROS DESIGNS CORP.

DOCUMENT NUMBER: P05000147470

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

Please return all correspondence concerning this matter to the following:

MIGUEL A. CLAROS

Name of Contact Person

C&D CLAROS DESIGNS CORP.

Firm/ Company

392 SW CHERRYHILL ROAD

Address

PORT SAINT LUCIE, FLORIDA 34953

City/ State and Zip Code

SALMO100@aol.com

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

For further information concerning this matter, please call:

Miguel A. CLAROS

Name of Contact Person

at (772) 323-0165

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee *paid* ☐ \$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

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Document Number of Corporation (if known))

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

FLORIDA 34953

Page 1 of 3

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> |
|--------------|-------------|---|--|
| D | JULY CLAROS | 392 SW CHERRYHILL ROAD Port Saint Lucie, Florida 34953 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> 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: 05/11/2010
(date of adoption is required)

Effective date if applicable: _____
(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 05/18/2010

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)

MIGUEL A. CLAROS

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)