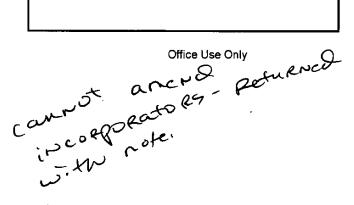
P06000010892

(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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10/31/06--01040--011 **35.00



Amera



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 16, 2006

Mayelin Rodriguez Santiago Housing Inc. 10110 N. 15th St Tampa, FL 33612

SUBJECT: SANTIAGO HOUSING INC.

Ref. Number: P06000010892

We have received your document for SANTIAGO HOUSING INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$35.00.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Susan Payne Senior Section Administrator

Letter Number: 706A00061384

PECCENED NO 8:00 06 OCT 30 M 8: 00

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	INTIAGO HOUSING	INC.	
DOCUMENT NUM	BER:		
The enclosed Article	s of Amendment and fee ar	re submitted for filing.	
Please return all corre	espondence concerning this	s matter to the following:	
	name - Cere E	מחסוכות ד	•
-	MAYELIN K	me of Person)	
	SANTIAGO HOUS	SING TUC.	
	(Name o	S/N9 TNC. fFirm Company)	
	10110 N. 152	4 ST	
,		(Address)	
J	AMPA, FI. 3	RG/Z ate/ and Zip Code)	
وي	(City/ Sta	ate/ and Zip Code)	
For furth Sinformation	on concerning this matter, p	olease call:	
a de la			
MAYelik	1 RODES9482	at (<u>813</u>) <u>426</u> (Area Code & Daytim	-6575
四尺5	(Name of Person)	(Area Code & Daytim	e Telephone Number)
Enclosed is a check for	or 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 (Additional Copy is enclosed)
Mailing Address	Str	eet Address	
Amendment Section	An	nendment Section	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Articles of Amendment to Articles of Incorporation of

FILED
06 OCT 30 AM IO: L3

	SAL	TiAgo	HOUSING	R T-NC	SE TALI	CRETARY OF STAT.
	(Name	of corporation	as currently filed wi	th the Florida D	ept. of State)	- Laurent Faul
						
		(Docume	nt number of corpor	ation (if known)		
	-		7.1006, Florida St s articles of incor		lorida Profit	Corporation
NEW COR	RPORATE NAI	AE (if chang	ting):	·		
(must conta	in the word "corpor	ation," "compar	ny," or "incorporated	" or the abbrev	iation "Corp.," "	Inc.," or "Co.")
	IENTS ADOPT eleted: (BE SPEC		Article Number	(s) and/or Arti	icle Title(s) b	eing amended,
ARTICLE!	V3 SAN	Tingo,	RODRIGUE TH ST		PRES.	
	10110	Ŋ. 15	TH ST		DeleTe	-D
	TAMPL	1, FS. 330	412		· · . · · · · · · · · · · · · · · · · ·	
apticle	V: MAY	elin 1	Rodriguez		PRE	<u> </u>
	10110	N. 1574	5.		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
a produce	TAMPA,	FJ. 336	12		ADD:	<u>e</u> D
						
		(Atta	ch additional pages i	f necessary)		
If an amend for impleme	lment provides fenting the amend	or exchange, lment if not o	reclassification, contained in the a	or cancellatio mendment its	n of issued shelf: (if not app	nares, provisions licable, indicate N/A)
			KILA			
	-					

(continued)

The date of each amendment(s) adoption: 8/19/06
Effective date if applicable:
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 19 day of <u>August</u> , <u>2106</u> .
Signature (By defrector, 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)
MAYELIN RODRITUEZ. (Typed or printed name of person signing)
(Title of person signing)

FILING FEE: \$35