

P06000048205

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

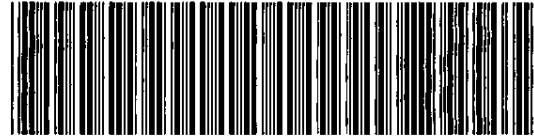
(Business Entity Name)

(Document Number)

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TO DEC 14 PM 4 24  
SECRETARY OF STATE  
FALLS CHURCH, VIRGINIA

Amend

12-15-10

DC



RECEIVED

10 DEC 14 AM 10:26

**FLORIDA DEPARTMENT OF STATE**  
**Division of Corporations**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

October 20, 2010

**GONZALO JIMENEZ**  
**7812 NW 164 ST.**  
**MIAMI, FL 33016**

**SUBJECT: CANTARELLA SERVICES, INC.**  
Ref. Number: P06000048205

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

**PLEASE COMPLETE THE LAST PAGE OF THE DOCUMENT AS THIS PAGE WAS NOT PREVIOUSLY RECEIVED IN OUR OFFICE.**

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) 245-6906.

Darlene Connell  
Regulatory Specialist II

Letter Number: 510A00024743

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** CANTARELLA SERVICES INC

**DOCUMENT NUMBER:** P06000048205.

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

Please return all correspondence concerning this matter to the following:

GONZALO F. JIMENEZ  
Name of Contact Person

VICE-PRESIDENT / SECRETARY  
Firm/ Company

7812 NW 164 ST  
Address

MIAMI FL 33016  
City/ State and Zip Code

MIAMI GONZALO @ HOT MAIL. COM.  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GONZALO F. JIMENEZ at (305) 303 3879  
Name of Contact Person Area Code & Daytime Telephone Number

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

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(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

CANTARELLA SERVICES, INC.

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

P 06000048205

(Document Number of Corporation (if known))

FILED  
DEC 14 PM 4:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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)

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

PO BOX 126613

HIALEAH FL 33012

**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:

CLEOTE N. JIMENEZ

New Registered Office Address:

13434 SW 90 TER

(Florida street address)

MIAMI FL 33186

(City)

Florida  
(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

**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>
<u>P</u>	<u>XIMENA JIMENEZ</u>	<u>7812 NW 164 ST</u> <u>MIAMI FL 33016</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>P</u>	<u>CLEOFE N. JIMENEZ</u>	<u>13434 SW 90 TERR</u> <u>MIAMI FL 33186</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<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)

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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)

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The date of each amendment(s) adoption: 12/01/10

Effective date if applicable: 12/01/10 (date of adoption is required)  
(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 12/01/10

Signature [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)

CLEOTE N. JIMENEZ  
(Typed or printed name of person signing)

PRESIDENT.  
(Title of person signing)