## P06000094852

(Requestor's Name)
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(City/State/Zip/Phone #)
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(Business Entity Name)
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Amond C.COULLIETTE

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**EXAMINER** 

OCT 282008

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION: <u>SAMANTA S</u>	LOTS, CORP.	<del></del>
DOCUMENT NUM	MBER: <u>P06000094852</u>		
The enclosed Article	es of Amendment and fee a	re submitted for filing.	
Please return all cor	respondence concerning thi	s matter to the following:	
		.UZ ESPITIA of Contact Person)	
	(Nume (	or common reliability	
		FIN ACCOUNTING rn/ Company)	
· 		E PARK DRIVE SUITE 131 (Address)	<del></del>
		TON, FL 33331 tate and Zip Code)	
For further informat	tion concerning this matter,	please call:	
LUZ ESPITIA (Name	of Contact Person)	at ( <u>954</u> ) <u>384856</u> (Area Code & Daytime	
Enclosed is a check	for the following amount m	nade payable to the Florida De	partment 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 Ad Amendment Division of 6 P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	





October 15, 2008

LUZ ESPITIA E & F LATIN ACCOUNTING 2645 EXECUTIVE PARK DR., STE. 131 WESTON, FL 33331

SUBJECT: SAMANTA SLOTS, CORP.

Ref. Number: P06000094852

We have received your document for SAMANTA SLOTS, CORP. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Where is your original signature for the registered agent? We only have a photocopy for page one of your amendment application. You will need to resubmit your application with an original signature for the new registered agent.

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) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 908A00053817

## Articles of Amendment to Articles of Incorporation of

SAMANTA SLOTS, CORP.	
(Name of Corporation as currently file	d with the Florida Dept. of State)
P06000094852	
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florid following amendment(s) to its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the
A. If amending name, enter the new name of the corp	poration:
The new name must be distinguishable and contomication "Corp.," "Inc.," "Co". A professional corporation name must association," or the abbreviation "P.A."	or Co.," or the designation "Corp," "Inc," or
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	PESS )
	08 OCT
C. Enter new mailing address, if applicable:	28 C
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	9 PM P2: 5
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent: RAUL	CAVIEDES
<u>3699 New Registered Office Address</u> :	NW 15 ST (Florida street address)
LAUDE	(City), Florida 3331 (Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. position.	tered Agent:  I am familiar with and accept the obligations of the
Signature	of New Registered Agent, if changing
Раде	1063

## 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)

**Title Name** Address Type of Action PST 4302 NW 54 ST JORGUE LINARES ☐ Add Remove FT LAUDERDALE D\_\_\_\_ **DIANA GALEANO** 100 TRAILMORE LANE ☐ Add Remove WESTON FL 33326 PST **RAUL CAVIEDES** 3699 NW 15 ST ☑ Add ☐ Remove LAUDERHILL FL 33311 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 amendmen	nt(s) adoption: <u>10/02/2008</u>
Effective date if applicable:	
·	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	vere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statemen ded for each voting group entitled to vote separately on the amendment(s):
"The number of vote:	s cast for the amendment(s) was/were sufficient for approval
by	.,,
•	(voting group)
The amendment(s) was/w action was not required.	vere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/w action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated	10/6/08
se	by a director, president or other officer + if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
·	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	) IRECTOR
	(Title of person signing)