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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: DOCUMENT NUMBER:	LAS	AMERICAS	JEWEL	RY : PAWN, INC
DOCUMENT NUMBER:	P060000	795904		
The enclosed Articles of Amendm				
Please return all correspondence c	oncerning thi	s matter to the fol	lowing:	
	CHNIS11A	IN ASTU	DILL O	
-	<u> </u>	Name of C	ontact Person	1
·	LAS A	AcAlcAs J	EWHLRY .	: PAWN INC.
	2358	WEST UA	K K 1 DGE	RVAD
	ORLINDO	FL. 32 City/ State	10 9 and Zip Code	e
C Y Y	Sale;	x 9 6 @ be used for future	yaho annual report	o.com
For further information concerning	g this matter,	please call:		
CHAISHAU ASTUR	0 111	a	407	PPP - 2850 de & Daytime Telephone Number
Name of Contact P	erson		Area Co	de & Daytime Telephone Number
Enclosed is a check for the follow	_		: Florida Depa	artment of State:
☑ \$35 Filing Fee ☐\$43. Cert	75 Filing Fee ificate of Stat	us Cernnec	nal copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Sec Division of Corp P.O. Box 6327 Tallahassec, Fl.	ntion porations		Amend Divisio Clifton	Address Iment Section on of Corporations Building Securive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	Cu
(Name of Corporation as currently filed with the F	RY PAWN INC.
	torida Dept. of State)
P06000045984	Florida Dept. of State) 7 Florida Dept. of State 7 Florida Dept. of State 7 Florida Dept. of State
	-
risuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following ameridane
If amending name, enter the new name of the corporation:	
LAS AMERICAS JEWEKIZ)	y In C. The new
AAS AMFAI (AS JEWEK)?) ame must be distinguishable and contain the word "corporation" Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " ord "chartered." "professional association." or the abbreviation	"Co" A professional corporation name must contain the
Enter new principal office address, if applicable:	2358 WEST DAKNINGE HUA
rincipal office address <u>MUST BE A STREET ADDRESS</u>)	ORLA+00 FL. 32809
	7
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2758 WEST NAKRIBAC AND
(maining dianess meet m. A 103) (711 tt. no.)	2358 WEST CAKRIBAL RUA, ORLANDO FL. 32806
	URLANDO FL. 32804
If amending the registered agent and/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	8
Name of New Registered Agent V/A	
(Florida sv	veet address)
New Registered Office Address:	. Florida
(City)	, Florida(Zip Code)
ew Registered Agent's Signature, if changing Registered Agent nereby accept the appointment as registered agent. I am familiar	£ with and accept the obligations of the position.
4	, , , , , , , , , , , , , , , , , , , ,
Signature of New Registered	Court of all annuals

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)

Please note the officer director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer, S = Secretary; D = Director | TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer, CFO = Chief Financial Officer | If an officer director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD

Changes should be noted in the following manner. Currently John Doc is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doc. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add

Example: X Change	<u>PT</u>	John Do	<u>c</u>		
X Remove	<u>V</u>	Mike Jor	nes		
_X Add	<u>sv</u>	Sally Sn	u <u>ith</u>		
Type of Action (Check One)	<u>Title</u>		Name	•	<u>Addres</u> s
1) Change			N	14	
Add					and the second s
Remove					
2) Change					
Add					
Remove					
3) Change					
Add					•
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4) Change					
Add					
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Add					
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6) Change					
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iach <i>additional sh</i>	rets, if necessary)	(Be spec	ific)		
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i Titë	NAME	dr'	THE	CUR POAX TIVE	15 .
LAS	AMPRICA	15 JE	WELRY	TNC	
4 19					
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rovisions for imp (if not applical	lementing the an			or cancellation of iss d in the amendment	
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The date of each amendment(s) ad-	option:
Effective date if applicable:	2/27/13
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was-were adop by the shareholders was/were suf	oted by the shareholders. The number of votes east for the amendment(s) ficient for approval.
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	or the amendment(s) was/were sufficient for approval
hy LAS AMER	(voting group)
	(voting group)
action was not required. The amendment(s) was were adopaction was not required.	oted by the board of directors without shareholder action and shareholder oted by the incorporators without shareholder action and shareholder
Dated	02/21/13
(By a di selected	rector, president or other officer if directors or officers have not been , by an incorporator if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	CHAISTIAN ASTUDIALO
-	(Typed or printed name of person signing)
_	Pacs I Denj (Title of person signing)
-	(Title of person signing)