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ALLAHASSEE FISTATE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: LAS PALMAS IN	TERNATIONAL, INC.	
DOCUMENT NUMB			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
Į.	ALEJANDRO VELEZ	•	
<u>.</u>	•	Name of Contact Person	1
7	MIDTOWN REALTY GROU	-	
-		Firm/ Company	
1	.75 SW 7TH ST SUITE 2112		
-		Address	
Ŋ	MIAMI, FL 33130		
_		City/ State and Zip Code	
avelez(@midtown-realty.com	,	
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
ALEXANDER SAIEH		305	9611115 de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	ertment 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)
Amer Divis P.O. I	Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		ment Section n of Corporations Building xecutive Center Circle

Articles of Amendment to Articles of Incorporation of

LAS PALMAS INTERNATIONAL, INC.

(Name of Corporation as currently filed with the Florida Dept. of Sta	<u>ite</u>)		
P07000003271			
(Document Number of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts th its Articles of Incorporation:	e following	g amendi	ment(s)
A. If amending name, enter the new name of the corporation:			
		The n	ew
name must be distinguishable and contain the word "corporation," "company," or "incorporated" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation no word "chartered." "professional association," or the abbreviation "P.A."	or the ab ame must c	- breviati ontain t	on he
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)	SEGR	2017H	· ———
	HASS A	AY 5	Ë
D. If amending the registered agent and/or registered office address in Florida, enter the name of th	EFF.FI		ED.
new registered agent and/or the new registered office address:	罗克	14	
Name of New Registered Agent	E# (~)	Ö	
(Florida street address)	,		
New Registered Office Address:, Florid	a		_
(City)	(Zip C	ode)	
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)

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 Doe 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 Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John D	<u>oe</u>		
X Remove	<u>v</u> .	Mike Je	<u>ones</u>		
X Add	<u>sv</u>	Sally S	<u></u> mith		
Type of Action (Check One)	Title	•	Name		<u>Addres</u> s
1) Change	D		ALEJANDRA JARAMILLO		1001 BRICKELL BAY DR
X Add		_			SUITE 1512
Remove					MIAMI, FL 33131
2) Change				· · ·	
Add					
Remove					
3) Change				 .	
Add					
Remove					
4) Change			. •		
Add				ŕ	
Remove					
5) Change	•			.	
Add					
Remove				•	
6) Change		_			
Add					
Remove					·

Attach additional sheets, if necessary). (Be specific)	
	,
	······································
•	•
	•
f an amendment provides for an exchange, reclassification, or oppositions for implementing the amendment if not contained in (if not applicable, indicate N/A)	cancellation of issued shares, the amendment itself:
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	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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 4 - 28 - 2017 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)
JULIAN JARAMILLO
(Typed or printed name of person signing)
D ,
(Title of person signing)