

PO7000035593

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H10000123330 3)))



H100001233303ABCN

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : DORAL CORPORATE FILING SERVICE  
Account Number : I20070000081  
Phone : (305) 436-0979  
Fax Number : (305) 592-5575

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

COR AMND/RESTATE/CORRECT OR O/D RESIGN  
BUY WHATEVER INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

APPROVED  
AND  
FILED

10 MAY 25 AM 11:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 MAY 25 AM 8:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Handwritten signature*

Articles of Amendment  
to  
Articles of Incorporation  
of

**H10000123330****BUY WHATEVER INC.**(Name of Corporation as currently filed with the Florida Dept. of State)**P07000035593**(Document Number of Corporation (if known))

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:**

**DALILA'S FLOWERS GIFT OF GOD, INC.***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**)*

**10719 WEST FLAGLER STREET****MIAMI, FL 33174**

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

*(Mailing address **MAY BE A POST OFFICE BOX**)*

**10719 WEST FLAGLER STREET****MIAMI, FL 33174**

**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:

**10719 WEST FLAGLER STREET**

New Registered Office Address:

*(Florida street address)*

**MIAMI**

*(City)*

**Florida 33174**

*(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*

**H10000123330**

10 MAY 25 AM 11:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

**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)

**H 10000123330**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VP	ABAD PENA, JULIO D		<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<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)

Add: (VP) Fatima Luniela Gonzalez Manzanares - 10719 West Flagler Street

Miami, FL 33174

New Address - (P) MORALES, HECTOR Y - 10719 West Flagler Street

Miami, FL 33174

**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)

**H 10000123330**

The date of each amendment(s) adoption: 05/21/2010

(date of adoption is required)

Effective date if applicable:

(no more than 90 days after amendment file date)

H 10000123330

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 05/21/2010

X

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)

Hector Y. Morales

(Typed or printed name of person signing)

President

(Title of person signing)

H 10000123330