P0700045643

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special estructions to Filing Officer:
Special distructions to Filing Officer:
,
: Office Use Only



800210144878

07/21/11--01021--001 **35.00

Amend

FILED

11 JUL 21 PM 3: 39

SECRETARY OF STATE
FALLAHASSEE, FLORIDA

1 2 2 ...

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION:	HIALEAH VENDING CO	RP.
DOCUMENT NU	MBER:	P07000045643	
The enclosed Artic	cles of Amendment and fee	are submitted for filing.	
Please return all co	orrespondence concerning t	his matter to the following:	
		ost Formation Filings	\$.
		Name of Contact Person	
	My Corpor	ration Business Services, Inc.	
		Firm/ Company	
	23586	Calabasas Rd., Suite 102	
		Address	
	C	alabasas, CA 91302	
		City/ State and Zip Code	
	processing E-mail address: (to be us	g@mycorporation.com sed for future annual report notification)	
For further informa	ation concerning this matter	r, please call:	
	Formation Filings	at (<u>877</u>) 69	
Name	of Contact Person	Area Code & Daytime Tele	phone Number
Enclosed is a checl	k for the following amount	made payable to the Florida Depart	ment 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 Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	
Tallahassee, FL 32314		2001 Executive Center Circle	•

Tallahassee, FL 32301

MyCorporation^e

23586 Calabasas Rd. Suite 102 Calabasas, CA 91302

Toll-Free: 888-692-6778 | Fax: 818-879-8005 Email: customerservice@mycorporation.com

July 14, 2011

Division of Corporations Florida Department of State Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Hialeah Vending Corp.

Ladies and Gentlemen:

Please find enclosed for filing two signed originals of the amendment documents for the above-referenced entity.

Also enclosed is a check in the amount of \$35.00 as the appropriate filing fee.

Please return any filed copies or receipts to the undersigned.

Thank you very much for your assistance.

Sincerely,

Post-Formation Filings My Corporation Business Services, Inc. 23586 Calabasas Rd., Suite 102 Calabasas, California 91302

PLEASE DIRECT ALL QUESTIONS REGARDING THIS FILING REQUEST TO POST FORMATIONS AT 877-692-6772.

Articles of Amendment to Articles of Incorporation of

HIA	LEAH VENDING C	CORP. 11 JUL 21 PM 3: 40
(Name of Corporation as curr	ently filed with the Florid	la Dept. of State) PM 3: 40
	P07000045643	JALLANIARY OF CTATA
(Document Nun	nber of Corporation (if kno	CORP. 11 JUL 21 PM 3: 40 SECNETARY OF STATE OWN)
		Clorida Profit Corporation adopts the following
A. If amending name, enter the new name of	f the corporation:	
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "Corp," "In	c," or "Co". A professional corporation
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE D. If amending the registered agent and/or i	CE BOX)	in Florida, enter the name of the
new registered agent and/or the new regi	stered office address:	
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	(Florida street d	address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing the language of the appointment as registered at the language of the appointment as registered at the language of the language o		and accept the obligations of the position.
<u></u>	Signature of New Registere	d 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>	Address	Type of Action
V	Keith Mayor	7946 East Drive, Apt 303 Miami Beach, FL 33141	
			
			= .
(attach a	dditional sheets, if necessary). (Bo	e specific)	
provisi	mendment provides for an exchange ons for implementing the amendment applicable, indicate N/A)	ge, reclassification, or cancellation of increased in the amendmen	issued shares, t itself:

The date of each amendment	i(s) adoption: June 21, 2011
	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	are approved by the shareholders through voting groups. The following statement and 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	,,
<u> </u>	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court
app	ointed fiduciary by that fiduciary)
	Miguel Mayor
	(Typed or printed name of person signing)
	President
	(Title of person signing)