## P07000055927

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## **COVER LETTER**

**TO:** Amendment Section -Division of Corporations

NAME OF CORPORATION: Inversiones Matacumbe, Inc.			
DOCUMENT NUMBER: P07000055927			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Viviana Fernandez			
Name of Contact Person			
Inversiones Matacumbe, Inc.	<u></u> .		
Firm/ Company 5757 SW 3 Street			
Address			
Miami, Florida 33144			
City/ State and Zip Code			
ErnestoMotel@Gmail.Com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Viviana Fernandez at (305) 261-7704	4		
Name of Contact Person Area Code & Daytime Telep	hone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:			
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)	tatus		
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircTallahassee, FL 32301	cle		

## Articles of Amendment to Articles of Incorporation

(Name of Corporation as current	Maja cum h		
•	""		
(Document Numb	ber of Corporation (if knows	n)	<del></del>
Pursuant to the provisions of section 607.1006, Fits Articles of Incorporation:	Florida Statutes, this <i>Florida</i>	Profit Corporation adopts the fo	ollowing amendment(s)
A. If amending name, enter the new name of	the corporation:		
			The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," o	'Corp," "Inc," or "Co". A		
B. Enter new principal office address, if appli	icable:		
(Principal office address <u>MUST BE A STREET</u>	<u>'ADDRESS</u> )		PE ST
C. Enter new mailing address, if applicable:			- 8
(Mailing address MAY BE A POST OFFIC	<u>E BOX</u> )		- 17 Pa / 18
			10 × 10
			55
	-		A THE
D. If amending the registered agent and/or re	aistanad office address in l	Ilovida, antay the name of the	
new registered agent and/or the new regist		toriua, enter the hame of the	
Name of New Registered Agent			
	(Florida street addr	ess)	
New Registered Office Address:		, Florida	
	(City)	(Zip Co	ode)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag		l accent the obligations of the no	sition
t nevery accept the appointment as registered ag	.cm. I um jumusur wun und	i accept the omigutions of the po	5
C:	of New Posistand Asset 5	Cabanaina	
Signature	of New Registered Agent, ij	cnanging	

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 Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	, <u>Name</u>	<u>Addres</u> s
1) <u>×</u> Change Add Remove	<u>s</u>	Ernesto G. Fernandez	5757 SW 3 Street Miami, Florida 33144
2) <u>×</u> Change Add Remove	VP	Ana E. Fernandez	5757 SW 3 Street Miami, Florida 33144
3 ) <u>x</u> Change Add Remove	<u>P</u>	Viviana Fernandez	5757 SW 3 Street Miami, Florida 33144
4) Change Add Remove	VP	Ana M. Torres	5757 SW 3 Street Miami, Florida 33144
5) Change Add Remove		_	
6) Change Add Remove		_	`

f amending or adding additional Arti- attach additional sheets, if necessary).	cles, enter change(s) here: (Re specific)
anden duantonal sneets, if necessary).	(be specific)
· · · · · · · · · · · · · · · · · · ·	
	-
**	
	- (BALLE
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) a	doption: 03/01/2012
Effective date if applicable: 02	2/01/2012
Income date in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
*	for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated April 1	6,/2012
(By a d selecte	irector, predident or other officer – if directors or officers have not been d, by artificorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
Ť	Viviana Fernandez
	(Typed or printed name of person signing)
	President
	(Title of person signing)