# P01000105668

(Re	questor's Name)	
(Ad	dress)	
. (Ad	dress)	
(Cit	y/State/Zip/Phone	<i>→</i> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	OF CORPORATION:MACARENA FINANCIAL, INC				
DOCUMENT NUI	MBER:	P07000105668			
The enclosed Articl	es of Amendment and 1	ee are submitted for filing.			
Please return all cor	respondence concerning	g this matter to the following:			
<u></u>	MA	NUEL A. RAMIREZ, ESQ.			
		Name of Contact Person			
_	C/	ASTRO & RAMIREZ, LLC			
		Firm/ Company			
1805 Ponce de Leon Blvd., Suite 500					
		Address			
_	Co	oral Gables, Florida 33134			
		City/ State and Zip Code			
	E-mail address: (to be	nnyar@bellsouth.net  used for future annual report notification)			
For further informat	ion concerning this mat	ter, please call:			
Mar	nuel A. Ramirez	at ( 305 ) 372-2800			
Name o	f Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check	for the following amou	nt made payable to the Florida Department of State:			
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed)  □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Add Amendment Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301



### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 17, 2011

MANUEL A. RAMIREZ, ESQ. CASTRO & RAMIREZ, LLC 1805 PONCE DE LEON BLVD., STE. 500 CORAL GABLES, FL 33134

SUBJECT: MACARENA FINANCIAL, INC.

Ref. Number: P07000105668

We have received your document for MACARENA FINANCIAL, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Written approval and clearance of the words BANK, BANC, BANCO, BANQUE, BANKER, BANKING, TRUST COMPANY, SAVINGS AND LOAN ASSOCIATION, SAVINGS BANK or CREDIT UNION, or words of similar import in any context or any manner must be obtained from the Office of Financial Regulation, pursuant to section 655.922(2a), Florida Statutes.

Enclosed is a "Corporate Name Approval Request" form to be completed and sent to the address indicated on the form. If the proposed name is approved by the Office of Financial Institutions, resubmit the document and the approval letter to the Division of Corporations for filing. The Office of Financial Institutions' phone number is 850-410-9800.

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Letter Number: 211A00019296

Irene Albritton
Regulatory Specialist II

CRETARY OF STATE

## **Articles of Amendment Articles of Incorporation**

#### MACARENA FINANCIAL, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

	00105668		
(Document Number	er of Corporation (if kn	own)	
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this A	Florida Profit Corporation adop	ts the follo
A. If amending name, enter the new name of the	ne corporation:		
MASA	RC CORP.		The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the de name must contain the word "chartered," "profes	esignation "Corp," "Ir	nc," or "Co". A professional co	
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)			
C. Enter new mailing address, if applicable:			-
(Mailing address MAY BE A POST OFFICE	<u>BOX</u> )		
D. If amending the registered agent and/or reg new registered agent and/or the new register		in Florida, enter the name of th	<u>ie</u>
Name of New Registered Agent:	-112-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
New Registered Office Address:	(Florida street	address)	
_		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen		and accept the obligations of the	position.
Siar	nature of New Registers	ed 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) Title **Name** <u>Address</u> **Type of Action** ☐ Add ☐ Remove ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)

The date of each amendi	nent(s) adoption: August 15, 2011
Effective date <u>if applical</u>	August 15, 2011  (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment	(CHECK ONE)
✓ The amendment(s) was by the shareholders was	s/were adopted by the shareholders. The number of votes cast for the amendment(s) as/were sufficient for approval.
The amendment(s) was must be separately pro	s/were approved by the shareholders through voting groups. The following statement wided for each voting group entitled to vote separately on the amendment(s):
"The number of ve	otes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was action was not required	s/were adopted by the board of directors without shareholder action and shareholder.
The amendment(s) was action was not required	s/were adopted by the incorporators without shareholder action and shareholder d.
Dated A	August 15, 2011
Signatur	
	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of alreceiver, trustee, or other court
	appointed fiduciary by that fiduciary)
	Manuel A. Ramirez
	(Typed or printed name of person signing)
	Attorney in Fact
	(Title of person signing)