P07000115513

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ZUIO SEP 13 PH 1: 36

Amend

TB SEP 15 2010

COVER LETTER

*TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION:	PUERTAS MENDOZA,	INC	
DOCUMENT NUM	ЛВЕR:	P07000115513		
The enclosed Article	es of Amendment and fee a	re submitted for filing.		
Please return all cor	respondence concerning thi	is matter to the following:		
_		ALTER MENDOZA		
	.N	lame of Contact Person		
_		Firm/ Company		
	4547 VILMA LANE			
		Address		
		M BEACH - FLORIDA - 33409 ity/ State and Zip Code		
		.,		
	E-mail address: (to be use	d for future annual report notification)		
For further informat	ion concerning this matter,	please call:		
WAL	TER MENDOZA	at (561) 9	32-5473	
Name o	f Contact Person	Area Code & Daytime Te		
Enclosed is a check	for the following amount n	nade payable to the Florida Depar	tment of State:	
	\$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 Ade Amendment Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ	le	

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

PUERTAS MENDOZA, INC.

TALLAHASSOCO PH 1: 36 (Name of Corporation as currently filed with the Florida Dept. of State)

P07000115513

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following

on "Corp," "Inc	"company," or "incorporated" oc," or "Co". A professional corpor the abbreviation "P.A."
<u></u>	
	in Florida, enter the name of the
ce address.	
(Florida street	address)
	, Florida
(City)	(Zip Code)
	ce address: (Florida street

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
<u>VP</u>	LUIS RENE RODAS DE LEDN	1901 WABASSO DRIVE WEST PALM BEACH-FL-33409	☑ Add □ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
WALTER ME	ional sheets, if necessary). (Be specific ENDOZA 50% SHARES & LUIS RI	ENE RODAS DE LEON 50%	SHARES
provisions	dment provides for an exchange, reclar for implementing the amendment if no applicable, indicate N/A)		
			

The date of each amendmen	
Effective date if applicable:	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s vere sufficient for approval.
	ere 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} 100%	
	(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
Dated_09/0	08/2010
Signature _	rualter Mendosa.
	y 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
	pointed fiduciary by that fiduciary)
	WALTER MENDOZA
	(Typed or printed name of person signing)
	President
	(Title of person signing)