# 000079664

# Florida Department of State

Division of Corporations Public Access System

### **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.

(((H09000138185 3)))



H090001381853ABC2

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 : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I2000000146

Phone

: (305)444-4994

Fax Number

: (305)444-4977

# COR AMND/RESTATE/CORRECT OR O/D RESIGN

### LA PASION CO.

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

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

**446444906** 

16:6 800S 80 mut

I.q

## Articles of Amendment to Articles of Incorporation of

(((H09000138185)))

LA	PASION CO.			
(Name of Corporation as cu	rrently filed with the Florida D	ept. of State)		
(Document Number of Corporation (if known)				
A. If amending name, enter the new name	of the corporation:	•	_	
name must be distinguishable and contai abbreviation "Corp.," "Inc.," or Co., " or name must contain the word "chartered," "j	the designation "Corp." "Inc," o	or "Co". A professional o	_The new ed" or the corporation	
B. Enter new principal office address, if a	pplicable:		_ 0	
(Principal office address MUST BE A STR.)	EET ADDRESS )	70	- U 09 J	
		in in	E THE	
	-		- CO SUNTER	
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF)		7 0	PH 4:21	
D. If amending the registered agent and/o new registered agent and/or the new re		otida, enter the name of	i <u>he</u>	
Name of New Registered Agent:		· .	`	
New Registered Office Address:	(Florida street addr	err)		
•		, Florida	<del></del>	
	(City)	(Zip Code)		
New Registered Agent's Signature. If char I hereby accept the appointment as registered	ging Registered Agent: dagens. I am familiar with and a	accept the obligations of th	e position.	
_	Signature of New Registered Ag	rent, if changing		

Page 1 of 3

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(((H09000138185))) (Attach additional sheets, if necessary) <u>Title</u> Name Address Type of Action EBNESTO DEL RIO BAYONESTA 10728 SW 145 AVE. □ Add MIAMI FL 33188 Remove □ Add ☐ Remove ☐ Add ☐ Remove E. If amonding or adding additional Articles, enter change(s) here: (steach 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)

Page 2 of 3

٠

The date of each amendment	(e) adaption: JUNE 8 2009	
•	(date of adoption is required)	(((H09000138185))
Effective date <u>if annificable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(a) was/wes by the shareholders was/we	e adopted by the shareholders. The number of voter se sufficient for approval.	s cast for the amendment(s)
	re approved by the shareholders through voting groud for each voting group entitled to vote separately of	
"The number of votes	east for the amendment(s) was/were sufficient for ap	proval
by	<b>9</b> 0	
	(voting group)	
The amendment(s) was/wer action was not required.	e adopted by the board of directors without sharehold	lder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder	action and shareholder
Dated_JUNI		
(By	a director, president or other officer – if directors or cted, by an incorporator – if in the hands of a receive pinted fiduciary by that fiduciary)	
	ANTONIO CAMBLOR	
	(Typed or printed name of person signi	ng)
	PRESIDENT	·
	(Title of person signing)	·

Page 3 of 3