## P0800108016

· (Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PiCK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Do	cument Number)	•
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		į

Office Use Only

10-20-09



500161827715

10/19/09--01015--003 \*\*35.00

FILED
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

## **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations DAVCA NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ALVARO ACEVEDO BLUE LAGOON For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

Articles of Incorporation	FILED
of INC.	4009 DO-
rently filed with the Florida Dept. of	State TALL RETAIN AM //: /
20010 2011	TEAHASSY OF

P 0 8 0 0 1 0 3 0 1 6 (Document Number of Corporation (if known)

(Name of Corporation as cu

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "Corp," "Inc,	" or "Co". A professional corpor
3. Enter new principal office address, if app Principal office address MUST BE A STREE		
The special control of		
C. Enter new mailing address, if applicable	_	
and a second warm would be positioned to		
(Mailing address MAY BE A POST OFFI		·-:
(Mailing address MAY BE A POST OFFI  D. If amending the registered agent and/or a	CE BOX)	Florida, enter the name of the
(Mailing address MAY BE A POST OFFI  ). If amending the registered agent and/or new registered agent and/or the new regis	CE BOX)	Florida, enter the name of the
(Mailing address MAY BE A POST OFFI  D. If amending the registered agent and/or a	CE BOX)	Florida, enter the name of the
(Mailing address MAY BE A POST OFFI  ). If amending the registered agent and/or new registered agent and/or the new registered agent and/or the new registered Agent:	registered office address in stered office address:	
(Mailing address MAY BE A POST OFFI  ). If amending the registered agent and/or new registered agent and/or the new regis	CE BOX)	ddress)
(Mailing address MAY BE A POST OFFI  ). If amending the registered agent and/or new registered agent and/or the new registered agent and/or the new registered Agent:	registered office address in stered office address:	

## 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>	<u>Address</u>	Type of Action
VP	OTALORA	CLAUDIA 320 S. OCCID UNIT 101, 403 AGE 90057, USA	ENTAL BLUD Add
<del> </del>	<del></del>		
<del></del>	<del></del>		
E. If ame	ending or adding additional additional additional sheets, if necessar	Articles, enter change(s) here: y). (Be specific)	
provi		exchange, reclassification, or cancellamendment if not contained in the am	
		· · · · · · · · · · · · · · · · · · ·	
<del></del>			

The date of each amendment(s) adoption	: 10-16119
•	(date of adoption is required)
Effective date if applicable: (no more the	an 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.
	by the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):
"The number of votes cast for the ar	mendment(s) was/were sufficient for approval
by	<i>p)</i>
(voting grou	<i>p)</i>
The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder
Dated 10 /16/	109
Signature (By a director, pr selected, by an in	resident or other officer if directors or officers have not been accorporator – if in the hands of a receiver, trustee, or other court ary by that fiduciary)
LALVA	ARO ACE VEDO (Typed or printed name of person signing)
The C	ORPORATOR le of person signing)