~ 7-0900011497

(Requestor's Name)
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(City/State/Zip/Phone #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>INFORM</u>	ATICA DELTA, INC.	
DOCUMENT NUMBER: P0900001	1497	-
The enclosed Articles of Amendment and fee	e are submitted for filing.	
Please return all correspondence concerning t	this matter to the following:	
	Manfred Rosenow	
(Nam	ne of Contact Person)	
	irm of Manfred Rosenow, P.A.	
(1	Firm/ Company)	
56	615 Sheridan Street	
	(Address)	
	ywood, Florida 33021	
For further information concerning this matte	/ State and Zip Code)	
Tor rainer information concerning this matter	n, piedse edil.	
Martin Rosenow	at (<u>954</u>) <u>967-9690</u>	
(Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount	made payable to the Florida Dep	partment of State:
\$35 Filing Fee \$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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Ci	rcle

Tallahassee, FL 32301



March 12, 2009

MANFRED ROSENOW 5615 SHERIDAN STREET HOLLYWOOD, FL 33021

SUBJECT: INFORMATICA DELTA, INC.

Ref. Number: P09000011497

We have received your document for INFORMATICA DELTA, 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):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

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) 245-6916.

Letter Number: 209A00008488

Carol Mustain Regulatory Specialist II

Division of Compositions DO BOY 6997 Tollahassas Florida 99914



March 24, 2009

MANFRED ROSENOW 5615 SHERIDAN STREET HOLLYWOOD, FL 33021

SUBJECT: INFORMATICA DELTA, INC.

Ref. Number: P09000011497

We have received your document for INFORMATICA DELTA, 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):

You failed to make the correction(s) requested in our previous letter.

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 <u>NOT FOR PROFIT</u> 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) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 209A00008488

Articles of Amendment to Articles of Incorporation of

INFOR		•
(<u>Name of Corporation as c</u>	urrently filed with the Florida Dept. of St	<u>are)</u>
	09000011497	
(Document)	Number of Corporation (if known)	
ersuant to the provisions of section 607. Illowing amendment(s) to its Articles of Ir	.1006, Florida Statutes, this <i>Florida Profit</i> acorporation:	t Corporation adopts
If amending name, enter the new nam	ne of the corporation:	
ncorporated" or the abbreviation "Corp	e and contain the word "corporation," p.," "Inc.," or Co.," or the designation ame must contain the word "chartered	"Corp," "Inc," or
Enter new principal office address, if	applicable:	HAS
rincipal office address MUST BE A STR	REET ADDRESS)	SEE
1 33	,	21.5
	,	
		FLOR :
		FLORIDA
Enter new mailing address, if applica	<u></u>	FLORIDA
	<u></u>	FLORIDA
Enter new mailing address, if applica	<u></u>	FLORIDA
Enter new mailing address, if applica	<u></u>	FLORIDA
Enter new mailing address, if applica (Mailing address MAY BE A POST OF	ible: FFICE BOX)	FLORIDA
Enter new mailing address, if applica (Mailing address MAY BE A POST OF	ible: FFICE BOX) or registered office address in Florida, en	ter the name of the
Enter new mailing address, if applica (Mailing address MAY BE A POST OF	ible: FFICE BOX) or registered office address in Florida, en	ter the name of the
Enter new mailing address, if applica (Mailing address MAY BE A POST OF	ible: FFICE BOX) or registered office address in Florida, en	ter the name of the
Enter new mailing address, if applica (Mailing address MAY BE A POST OF Interest of the Intere	or registered office address in Florida, en	ter the name of the
Enter new mailing address, if applica (Mailing address MAY BE A POST OF III) If amending the registered agent and/new registered agent and/or the new registe	or registered office address in Florida, engregistered office address: SAME [ADDRESS CHANGE ONLY]	ter the name of the
Enter new mailing address, if applica (Mailing address MAY BE A POST OF MA	or registered office address in Florida, entregistered office address: SAME [ADDRESS CHANGE ONLY] 1241 SE 29th Street #101 (Florida street address)	
Enter new mailing address, if applica (Mailing address MAY BE A POST OF MAILING AND A POST OF MAY BE A POST OF MAILING AND A POST OF MAY BE A	or registered office address in Florida, engestered office address: SAME [ADDRESS CHANGE ONLY]	ter the name of the , Florida 33035 (Zip Code)

Signature of New Registered 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
Р	Change of Address - Casuso	1241 SE 29th Street	
		#101	Remove
		Homestead, FL 33035	
<u>s</u>	Jorge Gonzalez	1261 SE 29th Street	Add
		#205	☑ Remove
		Homestead, FL 33035	
<u>s</u>	Jorge Gonzales	1241 SE 29th Street	Add Add
		#101	Remove
		Homestead, FL 33035	
provis	mendment provides for an exchange, in ions for implementing the amendment not applicable, indicate N/A)		
		•	

Th	ne date of each amendment(s) adoption: 03/12/2009
Ef	fective date <u>if applicable</u> :	
		(no more than 90 days after amendment file date)
Ad	loption of Amendment(s)	(CHECK ONE)
	The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
		approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
	"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
	by	."
	(voting group)
	The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
Ø	The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
	Dated_04/27/2	009
	select	director, president or other officer - if directors or officers have not been red, by an incorporator - if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
		Pedro Casuso
		(Typed or printed name of person signing)
		President
		(Title of person signing)