## P09000013439

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Amend

**TB** JUL 17 2009

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: MERGLOSAL DIC. DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MERGLOSOL, INC. 10157 RIDGE BLOON AVE. NFO@ MERGIOBSL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

1015 Davide 7.

Name of Contact Person

Area Code & Daytime Telephone Numb 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 Certified Copy Certificate of Status (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

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of

	of		415Cp 13
MERGLO	BAI, INC	<u> </u>	AHARARL AH
(Name of Corporation as currently f	iled with the Florid	la Dept. of State)	- SECONO
P090000 134	439		ALECRETASSE OF SAMO
(Document Number of	f Corporation (if kno	own)	<i></i>
Pursuant to the provisions of section 607.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statutes, this F	Iorida Profit Corpo	oration adopts the follo
A. If amending name, enter the new name of the co	orporation:		
			The new
name must be distinguishable and contain the wo abbreviation "Corp.," "Inc.," or Co.," or the design name must contain the word "chartered," "profession	nation "Corp," "In	c," or "Co". A pr	ofessional corporation
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET AD</u>		NA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	NA	
D. If amending the registered agent and/or registered new registered agent and/or the new registered		in Florida, enter th	ne name of the
Name of New Registered Agent:			
New Registered Office Address:	(Florida street	address)	
		, FI	lorida
	(City)	(Zip Cod	lorida de)
New Registered Agent's Signature, if changing Reg	gistered Agent:		
I hereby accept the appointment as registered agent.		and accept the oblig	zations of the position.

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>	Address	Type of Action
<u> </u>	JORGE MORA	2008W117 Tevrace Aftro Jembrook Pives, Fl 330x	☑ Add ☑ ⊠ Remove
<u>VP</u>	HERNAN PATINO	2005W117Terracy appl PENSADOK PINES, FP 3505	
<u>\$\theta_{\cdot}\$</u>	Luis SANChez	10157 Risge Olony Ave. Orlando, 71. 3:429	_ ⊠ Add _ □ Remove
	ding or adding additional Articles, end dditional sheets, if necessary). (Be spe		
		N/A	
provisi	mendment provides for an exchange, a ons for implementing the amendment not applicable, indicate N/A)		
		N/A	

V The date of each amendment(s) adoption	. 7/3/09
Effective date if applicable:	(date of adoption is required) 109
(no more th	han 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) t for approval.
	by the shareholders through voting groups. The following statement of the group entitled to vote separately on the amendment(s):
"The number of votes cast for the a	amendment(s) was/were sufficient for approval
by(voting gro	<u></u>
The amendment(s) was/were adopted by action was not required.	y the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted b action was not required.	y the incorporators without shareholder action and shareholder
Dated9	43/09
selected, by and	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court iary by that fiduciary)
	Typed or printed name of person signing)
(T	PROSIDENCE itle of person signing)