## 109000015616

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## **COVER LETTER**

.TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	RATION:	T.S. 2808-09, INC	
DOCUMENT NUME	BER:	P09000015686	
The enclosed Articles	of Amendment and fee a	re submitted for filing.	
Please return all corres	spondence concerning thi	is matter to the following:	
		EFANO LORUSSO	
	N	Iame of Contact Person	
		Firm/ Company	
	1111 BRICI	KELL AVENUE SUITE 1100	<del></del>
		Address	
		MIAMI FL 33131 ity/ State and Zip Code	
	S.lorus E-mail address: (to be use	sso@lorusso.net d for future annual report notification)	
For further information	n concerning this matter,	please call:	
	ano Lorusso Contact Person	at ( 786 ) 2 Area Code & Daytime Te	2943984 Elephone Number
Enclosed is a check fo	r the following amount n	nade payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment Articles of Incorporation** of

10 MAR 26 PM 2: 12 T.S. 2808-09, INC (Name of Corporation as currently filed with the Florida Dept. of State) P09000015686 (Document Number of Corporation (if known)

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 t name must contain the word "chartered," "p	he designation "Corp," "Inc,"	or "Co". A professional corporatio
B. Enter new principal office address, if a (Principal office address MUST BE A STRE		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OF)		
D. If amending the registered agent and/o new registered agent and/or the new re		lorida, enter the name of the
		lorida, enter the name of the
new registered agent and/or the new re		
new registered agent and/or the new re  Name of New Registered Agent:	gistered 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)

Title	<u>Name</u>	Address	Type of Action
<u>VP</u>	STEFANO LORUSSO	1111 BRICKELL AVE SUITE 1100 MIAMI FL 33131	🛘 Remove
(attach a	dditional sheets, if necessary). (Be sp	pecific)	
provisi	mendment provides for an exchange, ons for implementing the amendmen not applicable, indicate N/A)		
		***************************************	

The date of each amendmen	.t(s) adoption: 3/20/2010
Effective date <u>if applicable</u> :	(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) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statemented for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(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_3/20	0/2010
sel	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)
	(Title of person signing)