# P09000022729

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2009 SEP 21 AM 10: 48
SECRETARY OF STATE

AJR 9/21/09

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION:	EL AMBIA CUBANO, IN	IC.
DOCUMENT NUM	1BER:	P09000022729	
The enclosed Article	es of Amendment and fee a	are submitted for filing.	
Please return all corr	respondence concerning th	is matter to the following:	
_	MARY C	HERNANDEZ-FROMENT	
	1	Name of Contact Person	
	EL A	MBIA CUBANO, INC.	,
		Firm/ Company	
	950	E MELBOURNE AVE	
		Address	
	MEL	BOURNE, FL 32901	
	C	ity/ State and Zip Code	
	elambiac E-mail address: (to be use	ubano@gmail.com d for future annual report notification)	<del></del>
For further informati	on concerning this matter,	please call:	
MARY C HE	RNANDEZ-FROMENT		27-8389
Name of	Contact Person	Area Code & Daytime Tele	phone Number
Enclosed is a check f	for the following amount n	nade payable to the Florida Depart	ment of State:
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status		\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Add		Street Address	
Amendment Section		Amendment Section	
Division of C	•	Division of Corporations	•
P.O. Box 632		Clifton Building	
Tallahassee, I	TL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

#### **Articles of Amendment**

to

### Articles of Incorporation

F	/	L	E	D

EL AMBIA	CUBANO, INC.	2009 SEP 21 AM 10: 48
(Name of Corporation as curren	ntly filed with the Flori	da Dept. of State)
P090	000022729	TAELAHASSES STATE
(Document Numb	per of Corporation (if kn	2009 SEP 21 AM 10: 48  TALLAHASSEE, FLORIDA  own)
ursuant to the provisions of section 607.1006, mendment(s) to its Articles of Incorporation:	, Florida Statutes, this I	Florida Profit Corporation adopts the follow
. If amending name, enter the new name of	the corporation:	
		The new
ame must contain the word "chartered," "profess.  Enter new principal office address, if applia principal office address MUST BE A STREET.  Enter new mailing address, if applicable:	icable:	1
(Mailing address MAY BE A POST OFFIC	gistered office address	in Florida, enter the name of the
Name of New Registered Agent:	• • • • • • • • • • • • • • • • • • • •	
New Registered Office Address:	(Florida street	address)
·		, Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing thereby accept the appointment as registered agences.		· · · · · · · · · · · · · · · · · · ·

## 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
<u>VP</u>	ALFREDO E HERNANDEZ	950 E MELBOURNE AVE MELBOURNE, FL 32901	
<del></del>	-FROMENT, SR		
	·		
E. If amend (attach ad	ding or adding additional Articles, ente	r change(s) here: ific)	
			·
provisio	nendment provides for an exchange, reons for implementing the amendment if ot applicable, indicate N/A)		
		-	

The date of each amendment	
·	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wee by the shareholders was/wee	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
The amendment(s) was/wer must be separately provide	re approved by the shareholders through voting groups. The following statemend for each voting group entitled to vote separately on the amendment(s):
, "The number of votes	cast for the amendment(s) was/were sufficient for approval
by	
•	(voting group)
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_SEP	TEMBER 11, 2009
(By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	MARY C HERNANDEZ-FROMENT
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)