P09000033973

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	CAVIR CORP	
DOCUMENT NU	JMBER:	BER:P09000033973	
The enclosed Arti	cles of Amendment and fee a	re submitted for filing.	
Please return all c	orrespondence concerning the	s matter to the following:	
•		Jacqueline Horta	
	N	ame of Contact Person	
	J Horta	Accounting & Taxes Inc	
		Firm/ Company	
·		6830 SW 159 PL	
		Address	
		MIAMI, FL 33193	
	C	ity/ State and Zip Code	
	E-mail address: (to be use	d for future annual report notification)	
For further inform	nation concerning this matter,	please call:	
ل	acqueline Horta	at (305) 387-2906	
Namo	e of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a chec	ck for the following amount n	nade payable to the Florida Department of State:	
	☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is	enclosed)
Mailing A	.ddress	Street Address	
Amendment Section Amendment Section			
Division of Corporations		Division of Corporations	
P.O. Box 6327		Clifton Building	
Tallahassaa FI 32314 2661 Evecutive Center Circle			

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 26, 2010

JACQUELINE HORTA
J HORTA ACCOUNTING & TAXES INC
6830 SW 159 PL
MIAMI, FL 33193

SUBJECT: CAVIR CORP Ref. Number: P09000033973

We have received your document for CAVIR CORP 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.

See athehed

The specific business purpose of the professional association must be stated in the document.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 710A00018004

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www.sunbiz.org



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 12, 2010

JACQUELINE HORTA J HORTA ACCOUNTING & TAXES INC 6830 SW 159 PL MIAMI, FL 33193

SUBJECT: CAVIR CORP Ref. Number: P09000033973

We have received your document for CAVIR CORP and your check(s) totaling see atheled \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

The specific business purpose of the professional association must be stated in the document.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 610A00016859

See Original segnature forge 3 of 3

Articles of Amendment Articles of Incorporation

of		4
CAVIR CORP		
(Name of Corporation as currently filed with t	the Florida Dept. of State)	E.
P09000033973		٠. ک
(Document Number of Corporati	ion (if known)	ارد امو
Pursuant to the provisions of section 607,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Profit Corporation adopts th	e foll
A. If amending name, enter the new name of the corporation	<u>n:</u>	
EDUARDO VALBUENA	A P.A. The	new
name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "Co name must contain the word "chartered," "professional associa	orp," "Inc," or "Co". A professional corpor	
B. Enter new principal office address, if applicable:	1342 NW 125 TERRACE	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	SUNRISE, FL 33323	

C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the

new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) , Florida_

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

(City)

Signature of New Registered Agent, if changing

(Zip Code)

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 Name** Address **Type of Action** VP. CARMEN V. FASENDA 1342 NW 125 Terrace ☐ Add Remove : SUNRISE, FL 33323 SEC NORELYS C. KANZLER 1342 NW 125 Terrace SUNRISE, FL 33323 ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendmen	t(s) adoption: 07701710
Effective date if applicable:	07/01/10 (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) vere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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/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_07/0	01/10 — Max
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	EDUARDO A VALBUENA
1	(Typed or printed name of person signing)
	. President
	(Title of person signing)