P09000038273

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	Idress)	
(Cì	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
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SECRETARY OF STATE
SALLAHASSEE, FLORIDA

JAN - 7.2013 T. ROBERTS

COVER LETTER

TO: Amendment Section

Division of Corpo	orations		~		
NAME OF CORPOR	RATION: MI CHINITA	A CORPORATION	N		
	BER: P0900003827				
	of Amendment and fee are su				
Please return all corres	spondence concerning this ma	tter to the following:			
	PATRICIA OROZ	, , ,			
	FATRICIA OROZ				
		Name of Contact Person	1		
		Firm/ Company			
	5671 NW 112TH	AVENUE, APT	107		
		Address			
	DORAL, FL 33178				
		City/ State and Zip Code	e		
pat	tysanz18@hotma	il.com			
.•	_	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
PATRICIA O	-	at (305	、815-5579		
	of Contact Person		de & Daytime Telephone Number		
			•		
Enclosed is a check to	r the following amount made	payable to the Florida Depa	artment 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)		
	ling Address		Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O.	P.O. Box 6327 Clifton Building		Building		
Tall	ahassee, FL 32314		Executive Center Circle assee, FL 32301		

Articles of Amendment Articles of Incorporation

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ALLA	HASSEE, FLORIDA	13
	FLORIDA	

MI CHINITA CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State)

MI CHINITA CORPORATION

(Document Number of Corporation (if known)

endment(s) to

A. If amending name, enter the new nam	ne of the corporation:		
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associati	tion "Corp," "Inc," or	on," "company," or "incorporated" or the a "Co". A professional corporation name must "P.A."	
3. Enter new principal office address, if applicable:		10763 NW 83 TERRACE, UNIT #6	
Principal office address <u>MUST BE A ST</u>		DORAL, FL 33178	
Enter new mailing address, if application (Mailing address MAY BE A POST O		10763 NW 83 TERRACE, UNIT #6	
		DORAL, FL 33178	
new registered agent and/or the new		<u>ss:</u>	
new registered agent and/or the new Name of New Registered Agent	registered office addres HEBERTO E. S	<u>ss:</u>	
new registered agent and/or the new Name of New Registered Agent	registered office addres HEBERTO E. S 10763 NW 83 T (Florida s	SANCHEZ ERRACE, UNIT #6 treet address)	
new registered agent and/or the new Name of New Registered Agent New Registered Office Address:	registered office address HEBERTO E. S 10763 NW 83 T (Florida s DORAL (City	SANCHEZ SANCHEZ FERRACE, UNIT #6 treet address) , Florida 33178 (Zip Code)	
Name of New Registered Agent New Registered Office Address: New Registered Signature, if ch	registered office addres HEBERTO E. S 10763 NW 83 T (Florida s DORAL (Cit)	SSE: SANCHEZ FERRACE, UNIT #6 Ireet address) , Florida (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)

Please note the officer/director title by the first letter of the office title:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sally	<u>/ Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	MICHAEL J. FISET	9010 MONTEGO BAY DRIVE
Add			CUTLER BAY, FL 33189
X Remove			
2) Change	DVP	BESSY A. FISET	9010 MONTEGO BAY DRIVE
Add			CUTLER BAY, FL 33189
X Remove			
3) Change	P	PATRICIA C. OROZCO	5671 NW 112 AVENUE, APT 107
X_{Add}			DORAL, FL 33178
Remove			
4) Change	DVP	HEBERTO ENRIQUE SANCHEZ	10763 NW 83 TERR # 6
X			DORAL, FL 33178
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
PATRICIA C. OROZCO 50 % CAPITAL STOCK
HEBERTO E. SANCHEZ 50 % CAPITAL STOCK
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 amendment(s) adoption: DECEMBER 20, 2012 **DECEMBER 20, 2012** Effective date if applicable: (no more than 90 days after amendment file date) Adoption of Amendment(s) (CHECK ONE) ■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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 The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Dated DECEMBER 20, 2012 Signature (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) PATRICIA C. OROZCO (Typed or printed name of person signing) (Title of person signing)