P0900056058

(Re	equestor's Name)	·
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

Ord/John

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: LA Dolce VITA Realty Group, Inc DOCUMENT NUMBER: P09 000056058 The enclosed *Articles of Amendment* and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Humberto Torres

Name of Contact Person

La Dolce Vita Realty Group, Ihc

Firm/Company 4910 NW 15th Terrace Pompano Beach, FL 33064 City/ State and Zip Code maria de dominicis (gaol. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Maria Torres

at (954) 3-96 > 158

Name of Contact Person

Area Code & Daytime Telephone Number 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 * already (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations Division of Corporations**

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle



September 28, 2010

HUMBERTO TORRES 12204 SW 6TH STREET PEMBROKE PINES, FL 33025

SUBJECT: LA DOLCE VITA REALTY GROUP, INC

Ref. Number: P09000056058

We have received your document for LA DOLCE VITA REALTY GROUP, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporation may have only one registered agent.

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) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 210A00023052

Articles of Amendment

•	to			
. , . Art	icles of Inco	rporation	•	
	of			ALC:
La Doice Vita	Realt	4 6r	oup, Inc	
(Name of Corporation as current)	y filed with t	he Florida De	ot. of State)	SS TO F
P09000056	058			# 3 0
(Document Number	r of Corporati	on (if known)		5º -
Pursuant to the provisions of section 607.1006, Famendment(s) to its Articles of Incorporation:	Torida Statut	es, this <i>Florida</i>	ı Profit Corporation	add sithe following
A. If amending name, enter the new name of the	e corporatio	<u>n:</u>		
				The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the desname must contain the word "chartered," "profess	signation "Ĉe	orp," "Inc," or ition," or the a	"Co". A profession bbreviation "P.A."	nal corporation
B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET A</u>		4910 A	JW 15th Te an oBeach	errace o,FL 33064
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)		N 15th 7 no Beach	Terrace 1,FL 33064
D. If amending the registered agent and/or registered agent and/or the new registered			rida, enter the name	of the
Name of New Registered Agent:			· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	(Flori	da street addres	ss)	
	(Citv)		, Florida (Zip Code)	<u>.</u>
	(CHy)		(Zip Coae)	

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.

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)

Ti	<u>tle</u>	Name	Address	Type of Action
<u>_</u>	<u>5</u> .	Maria Torres	4910 NW15thTerrage pompanoBeach, FL 3306	Add Remove
_	_ 			☐ Add ☐ Remove
				☐ Add ☐ Remove
		g or adding additional Articles, enter tional sheets, if necessary). (Be specif		
				.
		·		
F.	provisions	idment provides for an exchange, recl for implementing the amendment if n applicable, indicate N/A)		
		,		· · · · · · · · · · · · · · · · · · ·

The date of each amendment	
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement of 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)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
Dated	10/6/10
. Signature (By selc	· · · · · · · · · · · · · · · · · · ·
	Humberto Torres (Typed or printed name of person signing)
	President
	(Title of person signing)