P09000056346

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



300160601933

09/23/09--01034--006 **43.75

OP SEP 23 PH 2: OU SECRETARY OF SEARCE

NOT HARROED
TO ACKNOWLEDGE
OF FILING

DIVISION OF CORPORAT

Anen O

SEP 23 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	PORATION:	MARIEMEX, INC			
DOCUMENT NU	MBER:	P09000056346	<u> </u>		
The enclosed Artic	les of Amendment and fee a	re submitted for filing.			
Please return all co	rrespondence concerning thi	s matter to the following:			
		IES HERNANDEZ	 		
	N	fame of Contact Person			
		Firm/ Company			
	3351 CASCADE RD				
	Address				
		SONVILLE, FL 32207	····		
		GT@YAHOO.COM			
	E-mail address: (to be use	d for future annual report notification)			
For further informa	ation concerning this matter,	please call:			
INE	S HERNANDEZ	at (904)	554-8286		
	of Contact Person	Area Code & Daytime To	elephone Number		
Enclosed is a check	c for the following amount m	nade payable to the Florida Depa	rtment of State:		
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section		Street Address Amendment Section			
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division of Corporations Clifton Building 2661 Executive Center Circ	cle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

MARIEMEX,INC

the
the
the
he no
or t orati

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>	Name	Address	Type of Action
<u>P</u>	KERSTEN, COLLEN M	5800 W UNIVERSITY BLVD 521 JACKSONVILLE, FL 32216	☐ Add . ☑ Remove
		· · · · · · · · · · · · · · · · · · ·	☐ Add ☐ Remove
			☐ Add ☐ Remove
(attach addit CHANGE IN	or adding additional Articles, enter cional sheets, if necessary). (Be specific ES HERNANDEZ RANGE FROM ES HERNANDEZ ADDRESS TO:	VP TO P	SONVILLE,
			· , , ,
	, , , , , , , , , , , , , , , , , , , ,		
provisions	dment provides for an exchange, recla for implementing the amendment if no pplicable, indicate N/A)		
N/A	<u>, , , , , , , , , , , , , , , , , , , </u>		
		,	·

The date of each amendmen	t(s) adoption: OS	9/08/2009
Effective date <u>if applicable</u> :	09/08/2009	(date of adoption is required)
.	(no more than S	90 days after amendment file date)
Adoption of Amendment(s)	(CH	IECK ONE)
The amendment(s) was/we by the shareholders was/w		e shareholders. The number of votes cast for the amendment(s) approval.
7.5	• •	ne shareholders through voting groups. The following statemeng group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amen	ndment(s) was/were sufficient for approval
by		,,,
	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the	e board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the	e incorporators without shareholder action and shareholder
Dated_09/0	8/2009	THE STATE OF THE S
Signature	a director presid	dent or other officer – if directors or officers have not been
		porator – if in the hands of a receiver, trustee, or other court
арг	ointed fiduciary	by that fiduciary)
		LIBERTAD RODRIGUEZ
	(Ту	ped or printed name of person signing)
		INCORPORATOR
	(Title o	f person signing)