

01/22/2016 09:45

3059329393

SERBER&ASSOC

PAGE 01/05

Division of Corporations

H170002640623

Page 1 of 2

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H17000264062 3)))



H170002640623ABC

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.** Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850) 617-6330

From:

Account Name : SERBER & ASSOCIATES, P.A.  
Account Number : 120000000083  
Phone : (305) 932-6262  
Fax Number : (305) 933-9393

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

RECEIVED  
17 OCT -6 PM 4:44  
FLORIDA  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32399

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
CADIRO CORP.**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$35.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

OCT 09 2017  
C McNAIR

H170002640623

Articles of Amendment  
to  
Articles of Incorporation  
of

CADIRO CORP.

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

P09000064939

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

218 SE 14th Street

Apt 1101

Miami, FL 33131

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

218 SE 14th Street

Apt 1101

Miami, FL 33131

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 \_\_\_\_\_

(Florida street address) \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

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

H17 000 2640 623

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:

☒ Change      PT      John Doe

☐ Remove      V      Mike Jones

☒ Add      SV      Sally Smith

| Type of Action<br>(Check One)              | Title    | Name                        | Address                            |
|--|----------|-----------------------------|------------------------------------|
| 1) <input type="checkbox"/> Change         | <u>D</u> | <u>Carla Rodino</u>         | <u>2136 NE 123rd Street</u>        |
| <input type="checkbox"/> Add               |          |                             | <u>North Miami Beach, FL 33181</u> |
| <input checked="" type="checkbox"/> Remove |          |                             |                                    |
| 2) <input type="checkbox"/> Change         | <u>D</u> | <u>Daniel Adrian Gorgal</u> | <u>218 SE 14th Street</u>          |
| <input checked="" type="checkbox"/> Add    |          |                             | <u>Apt. 1101</u>                   |
| <input type="checkbox"/> Remove            |          |                             | <u>Miami, FL 33131</u>             |
| 3) <input type="checkbox"/> Change         |          |                             |                                    |
| <input type="checkbox"/> Add               |          |                             |                                    |
| <input type="checkbox"/> Remove            |          |                             |                                    |
| 4) <input type="checkbox"/> Change         |          |                             |                                    |
| <input type="checkbox"/> Add               |          |                             |                                    |
| <input type="checkbox"/> Remove            |          |                             |                                    |
| 5) <input type="checkbox"/> Change         |          |                             |                                    |
| <input type="checkbox"/> Add               |          |                             |                                    |
| <input type="checkbox"/> Remove            |          |                             |                                    |
| 6) <input type="checkbox"/> Change         |          |                             |                                    |
| <input type="checkbox"/> Add               |          |                             |                                    |
| <input type="checkbox"/> Remove            |          |                             |                                    |

H17 000 2640 623

**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)

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

H/70002640623

The date of each amendment(s) adoption: October 4, 2017Effective 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

by \_\_\_\_\_"  
(voting group)☐ 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 October 4, 2017

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)

Carla Rodino

(Typed or printed name of person signing)

Director

(Title of person signing)