## PD900011446

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SECRETARY, OF STATE TALLAHASSEE, FLORIDA

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### **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION:	CORREIO MANIA, INC.	
DOCUMENT NUMI	BER:	P09000071446	
The enclosed Articles	of Amendment and fee	are submitted for filing.	
Please return all corres	spondence concerning t	nis matter to the following:	
		CESAR BARROSO	
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	······································
	·		•
	C	PRREIO MANIA, INC.	•
<u>·</u> · .	<u>·</u>	Pirm/ Company	
	·	Time Company	
	2000	SLAND BLVD, APT 601	·
arang di dan	. 2000	Address	
		Address	
	AVE	ITURA, FLORIDA 33160	T
· . ——		City/ State and Zip Code	
• •	•		
•			;
	E-mail address: (to be u	ed for future annual report notification)	· ·
•			
For further information	n concerning this matte	:. please call:	•
	<i>g</i>		
CESA	R BARROSO	at ( 305 ) 93	1 <del>-</del> 0585
Name of C	ontact Person	Area Code & Daytime Tele	phone Number
			1 1
Enclosed is a check fo	r the following amount	made payable to the Florida Departr	nent of State:
☑ \$35 Filing Fee	\$43.75 Piling Pee & 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 Addr	<u>esa</u> .	Street Address	
Amendment Se		Amendment Section	
Division of Co		Division of Corporations	
P.O. Box 6327	· •	Clifton Building	
Tallahassee, Fl	L 32314	2661 Executive Center Circle	· ;
	-	Tallahassee, FL 32301	. 1

## Articles of Amendment to Articles of Incorporation of

## CORREIO MANIA, INC. (Name of Corporation as currently filed with the Florida Dept. of State)

### P09000071446

A. If amending name, enter the new name of the corporati	on:	•			
CESAR'S PHOTOS,					The new
name must be distinguishable and contain the word. "con abbreviation "Corp.," "Inc.," or Co.," or the designation " mame must contain the word "chartered," "professional associated."	Corp." "In	c." or "Co	". A	professional	ed" or the corporation
B. Enter new principal office address, if applicable:		•	3.	<u> </u>	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	1				
	<del></del>	·		-	
				; ;	
C. Enter new mailing address, if applicable;		-			+
(Mailing address MAY BE A POST OFFICE BOX)	-		, j		
	-	- - #- **	÷ .		ાં <u>.</u>
		•		· · · · · · · · · · · · · · · · · · ·	<u> </u>
D. If amending the registered agent and/or registered offic	o odduses	in Playida	a=4a-	, the name of	, de a
new registered agent and/or the new registered office as	idress:	m Eiolina	entei	rac dame of	106
Name of New Registered Agent:	•			:	•
Name of Ivew Registered Agent:		<u>-</u>	<del></del>	! : -	•
				1	•
New Registered Office Address: (Flo	rida street	address).	-		
		1:5	· ,	Florida	
(City	<i>)</i>		(Zip C	Code)	•
New Paristanal Amentic Claustina IS-bandan Tartan	Agent:			į.	•
<u>lew Registeren Agent's Signature, 11 changing Registeren .</u>					
New Registered Agent's Signature, if changing Registered a hereby accept the appointment as registered agent. I am fan	villar with	and accept	the ob	ligations of th	he position.
New Registered Agent's Signature, it changing Registered a fan fan fan fan fan fan fan fan fan f	niliar with	and accept	the ob	oligations of th	he position.

# 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

<del></del>		. <u> </u>	<del></del>			∴ ☐ Add _ ☐ Remove
<del></del>			<del> </del>			_ □ Add _ □ Remove
						Add Remove
E. If amending (attach additi	or adding on all sheets,	additional Ar if necessary).	ticles, enter c (Be specific	hange(s) here:	***	
		. · . <u>.                                   </u>				
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F. If an amend provisions i (if not a	lment prov for impleme oplicable, in	enting the am	change, recla	ssification, or c	succilation of l	ssued shares, itself;
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					- 1	
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· · · · · · · · · · · · · · · · · · ·	<del></del>	<del></del>				
		<del></del>				

The date of each amendment	(s) adoption: JUNE 21, 2010		•	
Effective date <u>if applicable</u> :	(date of adoption	n is required)		
Mecuve date i <u>t applicable</u> :	(no more than 90 days after amena	lment file date)		
Adoption of Amendment(s)	(CHECK ONE)		, t	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The ere sufficient for approval.	number of vote	s cast for th	ne amendment
	re approved by the shareholders throad for each voting group entitled to v			
. "The number of votes	cast for the amendment(s) was/were	sufficient for ap	proval	
. by	(voting group)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	(voting group)	•	•	:
action was not required.	re adopted by the board of directors re adopted by the incorporators with		· .	•
action was not required.	to adopted by the moorpolators with	.i		31.41.01.01.01
Dated_JUN	E 21, 2010	- 		
Signature	Cesarfugestel Phinos		**	
sele	a director, president or other office ected, by an incorporator – if in the h ointed fiduciary by that fiduciary)			
	CESAR BA	RROSO	.,	
. ••	(Typed or printed nam	e of person sign	ing) ;	<del></del> .
	DDEeif	DENT :		
	(Title of person signing)	JENI		<del></del>
	(Time of beison signing)	*	1,	