# P09000080406

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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	ESTRADA BUSINESS SERVICES, INC		
DOCUMENT NUMBER:	P09000080406		
The enclosed Articles of Amendme	at and fee are submitted for filing.		
Please return all correspondence co	cerning this matter to the following:		
	MARIELA HERNANDEZ		
	Name of Contact Person		
	Firm/ Company		
	1438 LEE BLVD		
	Address		
	LEHIGH ACRES, FL 33936  City/ State and Zip Code		
E-mail addr	estradaodalys@yahoo.com ss: (to be used for future annual report notification)		
For further information concerning	his matter, please call:		
ODALYS ESTRAD	A at ( 239 ) 440-7551		
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the followir	g amount made payable to the Florida Department of State:		
✓ \$35 Filing Fee  \$43.75 Filing Certificate o			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building		

2661 Executive Center Circle

Tallahassee, FL 32301

	Articles of Amendment	
	to Articles of Incorporation	£5.
· · · · · · · · · · · · · · · · · · ·	of	20. 1/2
, ESTDADA BUSI	NESS SEDVICES INC	ZOIDMAR 15 AM 11: 44
(Name of Corporation as curre	NESS SERVICES, INC	1805 CR15 AL
		AHASAY OF WILL
	000080406	SEE FISTATE
(Document Num	iber of Corporation (if known)	ORIOA
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	5, Florida Statutes, this <i>Florida</i>	Profit Corporation adopts the follo
A.) If amending name, enter the new name of	the corporation:	EFFECTIVE DAT 3-20-10
<u> </u>	S OF SW FLORIDA, INC	
name must be distinguishable and contain tabbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "proj	he word "corporation," "comp designation "Corp," "Inc," or	'Co". A professional corporation
(Principal office address <u>MUST BE A STREE</u>	<u>T ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC		
D. If amending the registered agent and/or r new registered agent and/or the new regis		da, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address	<del>)</del>
-		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing	ng Registered Agent:	
I hereby accept the appointment as registered a		ept the obligations of the position.
<u> </u>	ignature of New Registered Agen	t 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)

<u>Title</u>	•	Name	Address	Type of Action
•	_	<del> </del>		_
	_			_
	_			_
		g or adding additional Articles, enter ional sheets, if necessary). (Be specif		
	ovisions	Comment provides for an exchange, rec For implementing the amendment if implicable, indicate N/A)		

The date of each amendment	(s) adoption: <u>Q3/01/2010</u>
Effective date i£applicable:	03/20/2010 (dute of adoption is required)
	(no more than 90 days after amendment file date)
•	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
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 statemend 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)
	(voing group)
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amend rent(s) was/wer action was rot required.	re adopted by the incorporators without shareholder action and shareholder
Dated_03/0	3/2010
(By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	MARIELA HERNANDEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)