090000861

(Re	equestor's Name)			
(Ac	idress)			
(Ac	idress)			
(Ci	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	. MAIL		
(Bu	usiness Entity Nar	ne)		
(Document Number)				
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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 18, 2010

GENE BATRONIE 118 PIERCE CHRISTIE DRIVE SUITE B VALRICO, FL 33594

SUBJECT: CASA LATINO BRANDON REALTY, INC.

Ref. Number: P09000086183

We have received your document for CASA LATINO BRANDON REALTY, 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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The date of adoption of each amendment must be included in the document.

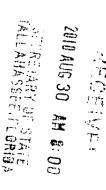
The name and title of the person signing the document must be noted beneath or opposite the signature.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 510A00019874



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION:	asa Latino Brandod Reulty, INC			
DACIDATENT M	PO 9	2000 86183			
DOCUMENT NU	MIBER: 707	5000 6 01 8 3			
The enclosed Artic	cles of Amendment and fee	are submitted for filing.			
Please return all co	orrespondence concerning t	his matter to the following:			
z loudo loudin air o	ontoppondonoo oontoniiig i				
		Name of Contact Person			
		Firm/ Company			
		Address			
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code			
•	· ·	City/ State and Zip Code			
•	at.				
	E-mail address: (to be us	ed for future annual report notification)			
To Guida Co	41.50				
For further informa	ation concerning this matter	r, please call:			
<u>'</u>		at () Area Code & Daytime Telephone Number			
Name	of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a checl	k for the following amount i	made payable to the Florida Department of State:			
\$35 Filing Fee	 	□ #42 75 Eiling Eng 9. □ #52 50 Eiling Eng			
M 333 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy Certificate of Status			
		(Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)			
Mailing Ad	ldress	Street Address			
Amendment Section		Amendment Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327		Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			

Articles of Amendment to Articles of Incorporation of

Casa Lati	No Brandan	Reolfy	TNS	
(Name of Corporation as curre				
P0900	0086183			
(Document Num	ber of Corporation (if I	known)		
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	i, Florida Statutes, this	s Florida Profit C	orporation ado	pts the following
A. If amending name, enter the new name of	the corporation:			
name must be distinguishable and contain to	of Tampe	Bay In) _	The new
name must be distinguishable and contain t abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "proj	designation "Corp," '	'Inc," or "Co". A	professional c	d" or the orporation
B. Enter new principal office address, if appl (Principal office address <u>MUST BE A STREE</u>)				-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>E BOX</u>)			10 AUS 30 AM IDE 37 SECRETARY OF STATE SECRETARY OF FLORE
D. If amending the registered agent and/or re- new registered agent and/or the new registered.		s in Florida, enter	the name of th	STATE FLORIDE
Name of New Registered Agent:				
New Registered Office Address:	(Florida stree	et address)		
-			Florida	
	(City)	(Zip C	.oaej	
New Registered Agent's Signature, if changing				
I hereby accept the appointment as registered ag	ent. I am familiar with	n and accept the ob	ligations of the	position.

Signature of New Registered Agent, if changing

removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) Title ' Name Type of Action Address _ 🛮 Add ☐ Remove ☐ Add ☐ Remove ☐ Add __ 🗆 Remove 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)

If amending the Officers and/or Directors, enter the title and name of each officer/director being

The date of each amendment	(s) adoption: 8/16/10
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more than 90 days after untenament fite date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/wes by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
The amendment(s) was/wer must be separately provide	re approved by the shareholders through voting groups. The following statement d 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. The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	8/16/10
. sele/c	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	President/Broker (Title of person signing)