P0900087631

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
, , , , , , , , , , , , , , , , , , ,					
(Document Number)					
,					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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02/24/10--01022--006 **35.00

03/19/10--01002--008 **17.50%

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COVER LETTER

Division of C			
NAME OF CORI	PORATION: 7/mbas	ella Management L	20rp
DOCUMENT NU	JMBER:		
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
	Luis D- Fonse	rea)	
	N	ame of Contact Person	
		•	
		Firm/ Company	······································
	2920 NW 195 \$	Address	
		ity/ State and Zip Code	·
<u> </u>	E-mail address: (to be used	ental yahoo.com d for future annual report notification)	
For further information	ation concerning this matter,	please call:	
Luis D. a.	Fonseca) of Contact Person	at (<u>305</u>) <u>621-</u> Area Code & Daytime Tel	8259 lephone Number
Enclosed is a chec	k for the following amount m	nade payable to the Florida Depar	tment of State:
☐ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



February 25, 2010

LUIS FONSECA 2920 NW 195 ST MIAMI GARDNES, FL 33056

SUBJECT: UMBRELLA MANAGEMENT CORP

Ref. Number: P09000087631

We have received your document for UMBRELLA MANAGEMENT CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

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) 245-6916.

Letter Number: 610A00004733

Carol Mustain Regulatory Specialist II

DULL AG ... DO DOY GOOM MILL THE 11 COOLA

Articles of Amendment to . Articles of Incorporation of

(Name of Corporation as current)	y filed with 1	he Florida Dep	t. of State)	
(Document Number	r of Corporati	on (if known)		
Pursuant to the provisions of section 607.1006, Famendment(s) to its Articles of Incorporation:	Florida Statut	es, this <i>Florida</i>	Profit Corporation	n adopts the following
A. If amending name, enter the new name of the	e corporatio	<u>n:</u>	•	
,				The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the destance must contain the word "chartered," "profess. B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET A) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or reginew registered agent and/or the new registered.	signation "Cosional associand associand associand associand associand associand associand associant associ	orp," "Inc," or stion," or the ab 2920 M Miami G ELorida 2920 M Miami 9 ELorida address in Flor	"Co". A profession breviation "P.A." Sandens 33056 20195 St anders 33056	PILED Onal corporation 10 MAR 18 PM 1: 56 FALCHIESE, FLORED
Name of New Registered Agent:				
New Registered Office Address:	(Flori	da street addres.	s)	
			, Florida_	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	nt. I am fami	liar with and acc		of the position.
Sign	ature of New	Registered Agen	it, 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: (Attpch additional sheets, if necessary)

Title Name <u>Address</u> **Type of Action** ☐ 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)

The date of each amendment	(date of adoption is required)
Effective date <u>if applicable</u> :	
,	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(sere sufficient for approval.
	re approved by the shareholders through voting groups. The following statemed 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/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated 0	3/08/2010 D. ()
Signature	HOUSENO/
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 pinted fiduciary by that fiduciary)
	Luis D. Fonseca) (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)