P10000015998

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(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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10 MAR 12 AM 8: 03
SECRETARY OF STATE
TALLAHASSLE FLORID

Amen C.COULLIETTE

MAR 1 5 2010

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State:

Mailing Address

☐ \$35 Filing Fee

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

□ \$43.75 Filing Fee &

Certificate of Status

\$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is enclosed)

Street Address

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

Articles of Amendment to Articles of Incorporation

	, of	•	٠		
Guardian Ange	(1. I	nc			
Name of Corporation as currently	y filed with t	he Florida Dept. o	f State)		
<u> 10000015998</u>					
(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 Pr</i>	ofit Corporation	adopts the	following
A. If amending name, enter the new name of th	<u>e corporatio</u>	<u>n:</u>			
				The r	
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the dename must contain the word "chartered," "profess	signation "Ĉ	orp," "Inc," or "C	o". A profession		
B. Enter new principal office address, if applica	able:				
(Principal office address MUST BE A STREET A	(ADDRESS			TAIS:	
				O M	Object of
				爱名	E E
C. Enter new mailing address, if applicable:	DOW)			SEE 2	1
(Mailing address <u>MAY BE A POST OFFICE</u>	<u>BUX</u>)		<u> </u>		
			<u> </u>	(S)	· Since
				<u>Dm</u>	
D. If amending the registered agent and/or registered agent and/or the new register			a, enter the name	of the	
	-				
Name of New Registered Agent:					
New Registered Office Address:	(Flori	ida street address)	<u> </u>		
	(CI)		, Florida		
	(City)		(Zip Code)		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent			ot the obligations of	of the positi	on.
Sign	nature of New	Registered Agent,	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
VP.	Cuillermo A Fonsea	16037 Mayo st Hollywood, FC 33023	_ I Add □ Remove
			_
			_
(attach d	additional sheets, if necessary). (Be spec	ific)	
			
provis	nmendment provides for an exchange, resions for implementing the amendment if not applicable, indicate N/A)	classification, or cancellation of is not contained in the amendment	ssued shares, itself:
	<u> </u>		
	· · · · · · · · · · · · · · · · · · ·		
,.			

The date of each amendment(s) adoption: _	3/9/1/0
Effective date if applicable:	(date of adoption is required)
	90 days after amendment file date)
Adoption of Amendment(s) (C	HECK ONE)
The amendment(s) was/were adopted by the shareholders was/were sufficient for	ne shareholders. The number of votes cast for the amendment(s) r approval.
	the shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the ame	endment(s) was/were sufficient for approval
by(voting group)	.,,
action was not required.	ne board of directors without shareholder action and shareholder ne incorporators without shareholder action and shareholder
	sident or other officer – if directors or officers have not been orporator – if in the hands of a receiver, trustee, or other court
Yessil Qure (Title	yped or printed name of person signing) ently president of person signing)