P10000026981

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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Amend

10 JUL 15 AM 8: 38



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 11, 2010

JOSE C. MARRERO, ESQ. LAW OFFICES OF JOSE C MARRERO, PA 1200 BRICKELL AVE STE 505 MIAMI, FL 33131

SUBJECT: FRESTATES CORP. Ref. Number: P10000026981

We have received your document for FRESTATES 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):

You failed to make the correction(s) requested in our previous letter.

Please show type of action for Roberto Travaglini.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 910A00014480

COVER LETTER

. TO: Amendment Section
Division of Corporations

NAME OF CORP	ORATION:	FRESTATES CORP.		
DOCUMENT NU	MBER:	P10000026981		
The enclosed Article	les of Amendment and fee a	re submitted for filing.		
Please return all con	rrespondence concerning thi	is matter to the following:		
-		E C. MARRERO, Esq.		
	N	lame of Contact Person		
_	LAW OFFICES	S OF JOSE C. MARRERO, PA		
		Firm/ Company		
	1200 BRIC	KELL AVENUE SUITE 505		
_		Address		
	1	MIAMI, FL 33131		
-		City/ State and Zip Code		
	rupa@	travaglini.com.ar		
	E-mail address: (to be use	d for future annual report notification)		
For further informa	tion concerning this matter,	please call:		
JOSE	C. MARRERO, Esq	at (305) 47	0-2030	
Name	of Contact Person	Area Code & Daytime Tele	phone Number	
Enclosed is a check	for the following amount n	nade payable to the Florida Departs	ment of State:	
 ■ \$35 Filing Fee	\$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)	
Mailing Ac Amendmen Division of P.O. Box 63 Tallahassee	t Section Corporations 327	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	;	

Tallahassee, FL 32301

Articles of Amendment ito Articles of Incorporation

FRESTATES CORP.

10 JUL 15 AM 8: 38 (Name of Corporation as currently filed with the Florida Dept.

P10000026981

(Document Number of Corporation (if known)

wing

Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the second		-	
name must be distinguishable and contain th abbreviation "Corp.," "Inc.," or Co.," or the a name must contain the word "chartered," "profe	designation "C	orp," "Inc," or "Co"	. A professional corporation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES.		1200 BRICKELL AVENUE	
		SUITE 505	
		MIAMI, FL 33131	· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	E BOX)	1200 BRICKELL	AVENUE
		SUITE 505 MIAMI, FL 33131	
D. If amending the registered agent and/or re new registered agent and/or the new regist			nter the name of the
Name of New Registered Agent:	JOSE C . MA	ARRERO, Esq.	**********
New Registered Office Address:		ELL AVENUE SUI' ida street address)	TE 505
<u>ı</u>	MIAMI (City)	(, Florida_ <mark>33131</mark> <i>Zip Code)</i>
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag			he obligations of the position.
10.68 10.68	gnaphre of New	Rogispered Agent, is c	Thanging
10 40			

Page 1 of 3

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 '	<u>Name</u>	Address	Type of Action
D	ROBERTO TRAVAGLINI	1200 BRICKELL AVENUE SUITE 505 MIAMI. FL 33131	Add Remove
			
	ding or adding additional Articles, ent dditional sheets, if necessary). (Be spe		
		1	
provisi	mendment provides for an exchange, to ons for implementing the amendment not applicable, indicate N/A)	eclassification, or cancellation of if not contained in the amendmen	issued shares, nt itself:
Ma			

The date of each amendment	i(s).adoption: 05/12/2010
Effective date if applicable:	(date of adoption is required)
Effective date in applicable.	(no more than 90 days after amendment file date)
<i>*</i>	~-
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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)
	(voiling group)
action was not required. The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_	05/12/2010
Signatu	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	ROBERTO TRAVAGLINI
	(Typed or printed name of person signing) (Title of person signing)
	Director of Corporation