## P100055945

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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATION: MICCIELI & SON, INC.  DOCUMENT NUMBER: P10000055945
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JULIO MORILLAS
Name of Contact Person
ZAYAS MORILLAS LLC
Firm/ Company
6303 BLUE LAGOON DR. SUITE 400
Address
MIAMI, FLORIDA 33126
City/ State and Zip Code
JULIO@ZAYASMORILLAS.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:

F

JULIO MOF	RILLAS	at (305	, 261-5777	
Name o	f Contact Person	Area Code & Daytime Telephone Numb		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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 Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

## **Articles of Amendment Articles of Incorporation** of

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14	APR	i	I	ρŅ	2: 00

## MICCIELI & SON, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P10000055945

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

ts Articles of Incorporation:  A. If amending name, enter the new name of t	he corporation:			The n
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," of	Corp," "Inc," or "Co"	". A professiona		ted" or the abbreviat
B. Enter new principal office address, if applic (Principal office address <u>MUST BE A STREET</u>			<del></del>	· · · · · · · · · · · · · · · · · · ·
	-		<u> </u>	•
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	E <i>BOX</i> )			
D. If amending the registered agent and/or registered agent and/or the new registered Name of New Registered Agent	ered office address:			of the
Name of Ivew Registered Agent		<del></del>		
<del></del>	(Florida street d	address)		
New Registered Office Address:			, Florida	
	(City)			(Zip Code)
New Registered Agent's Signature, if changing hereby accept the appointment as registered ago		and accept the o	bligations a	f the position.
Signature	of New Registered Age	nt. 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)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ne <u>s</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	Р		Renato Cesar Moreira Braga	5875 Collins Ave. #807
Add				Miami Beach, FL 33140
Remove				
2) Change	s	_	Claudio Miccieli Dos Santos	5875 Collins Ave. #807
Add				Miami Beach, FL 33140
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional A (Attach additional sheets, if necessary	Articles, enter change(s) here:	
N/A	(25 specific)	
		•
F. If an amendment provides for an ex	xchange, reclassification, or cancellation of issued shares	1
(if not applicable, indicate N/A)	mendment if not contained in the amendment itself:	
N/A	'	
		<del> </del>
<del></del>		

date this document was signed.	gopuon:	, if other than th
Effective date if applicable:		_
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.	
	proved by the shareholders through voting groups. The following statement 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/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated MARCH	127, 2014	
Signature	all of	_
selecte	lirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary)	
	CLAUDIO MICCIELI DOS SANTOS JR.	
	(Typed or printed name of person signing)	<del></del>
•	SECRETARY	
	(Title of person signing)	<del></del>