

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	



600276589416

600276589416 09/04/15--01015--022 **35.00

Office Use Only

Fied

SEP 09 2015

R. WHITE

15 SEP -4 PH 2: 55

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SOTO AAAA INC			
DOCUMENT NUMBER: P10000070343			
The enclosed Articles of Amendment and fee are subr	mitted for filing.		
Please return all correspondence concerning this matter	er to the following:	*	
AURELINAO DURAN		; · ·	
	Name of Contact Person		
407-342-1804			
2689 KERWOOD CR	Firm/ Company		
1.00	Address		
ORLANDO FL 32810			
	City/ State and Zip Code		
E-mail address: (to be used For further information concerning this matter, please		notification)	
AURELIANO DURAN	at (407	342-1804	
Name of Contact Person Enclosed is a check for the following amount made pa		e & Daytime Telephone Nun	nber
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status.		Certificate of Status	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Divisior Clifton I 2661 Ex	nent Section n of Corporations	•

Articles of Amendment to Articles of Incorporation of

SOTO AAAA INC		15 SEP -4 PA	i 2: 55
(Name of C	Corporation as currently filed wit		
P10000070343	;	MLLAHASSEF I	Stat. Tobria:
	(Document Number of Corporati	on (if known)	
Pursuant to the provisions of section 607.100	06, Florida Statutes, this <i>Florida Pr</i>	ofit Corporation adopts the following	owing amendment(s) to
its Articles of Incorporation:			
A. If amending name, enter the new name	e of the cornoration:		
Transferred in the state of the	c of the corporation.		
			The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designati	n the word "corporation," "comp	pany," or "incorporated" or t	he abbreviation
word "chartered." "professional association	n," or the abbreviation "P.A."	rojessional corporation name i	nusi comain ine
₹ : .			
B. Enter new principal office address, if a			
(Principal office address MUST BE A'STR	<u>EEI ADDRESS</u>)		
			
C Bearing and the state of the			
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF			•
	· · · · · · · · · · · · · · · · · · ·		
	·		 , · · ·
D. If amending the registered agent and/o		rida, enter the name of the	
new registered agent and/or the new r	egistered office address:		
Name of New Registered Agent			
- Committee of the comm			
A CAMPATAN AND AND AND AND AND AND AND AND AND A		the state of the s	·
	(Florida street address)		
New Registered Office Address:		Florida	
	(City)		(Zip Code)
• • •		***	
		: ·	
New Registered Agent's Signature, if chan	nging Registered Agent:		
I hereby accept the appointment as registere	d agent. I am familiar with and ac	cept the obligations of the posit	ion.
· · · · · · · · · · · · · · · · · · ·	<u></u>	ar water a	
	Signature of New Registered A	lgent, if changing	

If amending the Officers and/or Directors, enter th	e title and name of eacl	h officer/director being	removed and title, nam	e, and
address of each Officer and/or Director being added	i :	,		

(Attach additional sheets, if necessary)

Remove

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 Jönes 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	PT John Doe	
X Remove	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	D ADRIAN DURAN	2689 KERWOOD CR
XAdd		ORLANDO FL 32810
Remove		
2) Change	en e	
Add		
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6):Change		
Add		

(Attach additional sheets,	idditional Articles, enter chang if necessary). (Be specific)	<u>cas, acte</u> .	
	· · ·		ź [,]
			,
		······································	
•			
If an amendment provid	es for an exchange, reclassificanting the amendment if not con	ttion, or cancellation of issued	shares,
(if not applicable, in	ndicate N/A)		<u></u>
		San	
3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	·		
			· · · · · · · · · · · · · · · · · · ·
	and gares.		A. S. A.
			

The date of each amendment date this document was signed.		, if other than th
v	7/31/2015	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this be Department of State's records.	s date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment re sufficient for approval.	ent(s)
	e approved by the shareholders through voting groups. The following stated for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by		,
	(voting group)	
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder	older
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
8/31/2 Dated	015	
Signature 🔀		
se	y a director, president or other officer – if directors or officers have not be ected, by an incorporator – if in the hands of a receiver, trustee, or other opointed fiduciary by that fiduciary)	
<u>.</u>	AURELIANO DURAN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	