P11000005538

(Requestor's Name) (Address)	500201219715	
(City/State/Zip/Phone #)		
(Business Entity Name) (Document Number)	04/13/1101018008 **3	
Certified Copies Certificates of Status		

MAY -5 PM 2: 50

**35.00

Office Use Only

Special Instructions to Filing Officer:

315/11

Mend. 3



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 19, 2011

DANIEL RUTOIS DANIEL RUTOIS, P.A. 9710 STIRLING ROAD, SUITE 105 COOPER CITY, FL 33024

SUBJECT: CLOROFILA CORP Ref. Number: P11000005538

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(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.

Amendments for Fiorida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

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) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 311A00009518

RECEIVED

11 HAY -5 AM 9: 11

SECRETARY OF STATE
TAIL AHASSEE, FLORIG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Clorofila Corp		
DOCUMENT NUM	BER: P110000005538		
The enclosed Article	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
		niel Rutois	
	(Name of	Contact Person)	
	Danie	Rutois, P.A.	
	(Firm	n/ Company)	
	9710 Stirling	g Road, Suite 105	
	(,	Address)	
	Cooper	City, FL 33024	
	(City/ Sta	te and Zip Code)	
		anyRutois.com	
	•	d for future annual report not	ification)
For further information	on concerning this matter, please	e call:	
Daniel Rutois		at (954)_447-4	1445 Lytime Telephone Number)
(Name	of Contact Person)	(Area Code & Da	ytime Telephone Number)
Enclosed is a check for	or the following amount made p	ayable to the Florida Departr	nent 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)
Amer Divis P.O. 1	ng Address Indment Section It ion of Corporations It is a section ion of Section ion of Corporations It is a section in the se	Street Address Amendment Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 32	rations enter Circle

Articles of Amendment to **Articles of Incorporation** of

Clorofila Corp	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P11000005538	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts amendment(s) to its Articles of Incorporation:	the following
A. If amending name, enter the new name of the corporation:	
T_{i}	he new
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	==
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	HAY -5 PH 2:
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	50

Name of New Registered Agent:

New Registered Office Address:

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

(City)

Signature of New Registered Agent, if changing

(Florida street address)

, Florida

(Zip Code)

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>	<u>Name</u>	Address	Type of Action
<u>Tres</u>	Esteban Ariel Juiz Perez	9710 Stirling Road Suite 105 Cooper City, FI 33024	☑ Add □ Remove
Sec	Elsa Perez	9710 Stirling Road Suite 105 Cooper City, FL 33024	☑ Add ☐ Remove
E. <u>If amer</u>	iding or adding additional Articles, en	ter change(s) here:	
(attach d	additional sheets, if necessary). (Be spe	ecific)	
·			
			
· · ·			
····			
			····

The date of each amendmen	t(s) adoption: April 22, 2011
	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/by the shareholders was	were adopted by the shareholders. The number of votes cast for the amendment(swere sufficient for approval.
hav	the chairman or vice chairman of the board, president or other officer-if directors re not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	Marcelo Juiz Perez (Typed or printed name of person signing)
·	President (Title Control of the Cont
	(Title of person signing)

Page 3 of 3