# P11000010839

(R€	equestor's Name)	
(Ac	ldress)	· · · · · · · · · · · · · · · · · · ·
(Ac	idress)	
(Ci	ty/State/Zip/Phone	#)
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PICK-UP	☐ WAIT	MAIL
<b>(</b> Bı	usiness Entity Name	e)
(Dc	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
opecial instructions to	Timing Officer.	





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Amend, 12

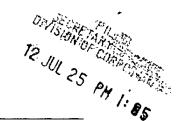
### **COVER LETTER**

TO: Amendment Section Division of Corporations BARA TROPICAL, INC. NAME OF CORPORATION: \_ P11000010839 DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ariana M. Quintanilla Name of Contact Person Bara Tropical, Inc. Firm/ Company 18255 SW 162 Avenue Address Miami, Florida 33187 City/ State and Zip Code info@baratropical.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 305 ) 235-0398 Area Code & Daytime Telephone Number Ariana Quintanilla Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee **□\$43.75** Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address

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

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

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



## BARA TROPICAL, INC.

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

dment(s) to

<del></del>	P1100001	0839	
(Document Nu	mber of Corporation (if	known)	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	, Florida Statutes, this a	Florida Profit Corporation a	dopts the following amendme
A. If amending name, enter the new name of	f the corporation:		TI.
name must be distinguishable and contain a "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "C	Co". A professional corpora	
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		18255 SW 162	Avenue
		Miami, Florida	33187
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)			
D. If amending the registered agent and/or new registered agent and/or the new reg			ne of the
Name of New Registered Agent	Ariana M. Qu		
Name of New Registered Agent	18255 SW 10	62 Avenue	
	(Florida stre	eet address)	•
New Registered Office Address:	Miami	, Florida	33187
	(City)		(Zip Code)
New Registered Agent's Signature, if change I hereby accept the appointment as registered Signature.		vith and accept the obligation	s of the position.

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 = Treusurer; 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, Treusurer, 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	one <u>s</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change Add	President	<u>t</u> _	Maria M. Baglio	15746 SW 82 Street Miami, Florida 33193
X Remove				
2) Change	President	<u>t</u>	Guillermo Quintaniila	18255 SW 162 Avenue
Add Remove				Miami, Florida 33187
3 ) Change Add X Remove	Vice-Preside	nt.	Filippo Baglio	15746 SW 82 Street Miami, Florida 33193
4) Change X Add	Secretary	<u>-</u>	Ariana M. Quintanilla	18255 SW 162 Avenue Miami, Florida 33187
Remove 5) Change		_		
Add Remove				
6) Change Add Remove		<del></del>		
				_ <del></del>

If amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
	- · · · · · · · · · · · · · · · · · · ·
lf an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
All and the second seco	

The date of each amendment(s)	adoption: 0 4 25 50 12
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	dopted by the board of directors without shareholder action and shareholder
action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated06/	25/2012
Signature	Therey Baglio
(By a select	director, 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 nted fiduciary by that fiduciary)
	Maria M. Baglio
	(Typed or printed name of person signing)
	President
	(Title of person signing)