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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORP	PORATION:	BARCODE LATIN AMERICA, INC	
DOCUMENT NU	MBER:	P11000013580	
The enclosed Artic	les of Amendment an	nd fee are submitted for filing.	
Please return all co	rrespondence concern	ning this matter to the following:	
		RODOLFO ABDEL  Name of Contact Person	
		Name of Comact Person	
	BARCODE LATIN AMERICA, INC		
		Firm/ Company	
	7601 NW 68 STREET #125		
		Address	
	MIAMI, FL, 33166		
		City/ State and Zip Code	
		DOLFO@APT-POS.COM to be used for future annual report notification)	
For further informa	ation concerning this r	matter, please call:	
RC	DOLFO ABDEL	at ( 305 ) 794-5223	
Name	of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check	t for the following am	nount made payable to the Florida Department of State:	
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Statu		sed)
Mailing Ad 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 to Articles of Incorporation of

## BARCODE LATIN AMERICA, INC

y filed with the Florida		- 4.72
	Dept. of State)	500 B
r of Corporation (if know	vn)	STATE
Florida Statutes, this Florida	orida Profit Corporat	ion adopts the follow
e corporation:		
		The new
sional association," or 1	" or "Co". A profes he abbreviation "P.A.	sional corporation "
able: I <i>DDRESS</i> )		<del></del>
		_
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<u>BOX</u> )		
<del></del>		<del></del>
	Florida, enter the na	ame of the
eu office audress.		
(Florida street ac	ddress)	
(Florida street ad	ddress), Florid	la
	Elorida Statutes, this Florida Statutes, this Florida Statutes, this Florida Statutes, this Florida Statutes, "Inc., signation "Corp," "Inc., signation," or the statutes of t	word "corporation," "company," or "inconsignation "Corp," "Inc," or "Co". A professional association," or the abbreviation "P.A.    Abble:   DDRESS

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:

(Atlach add	itional sheets, if necessary)		
Title	<u>Name</u>	Address	Type of Action
P	MARIA O CARRASCO	7601 NW 68 STREET STE 125 MIAMI FL 33166 US	☐ Add ☐ Remove
<u>P</u>	RODOLFO ABDEL	7601 NW 68 STREET STE 125 MIAMI FL 33166 US	☑ Add ☐ Remove
			☐ Add ☐ Remove
(attach ad	dditional sheets, if necessary). (Be sp	pecific)	
provisio		reclassification, or cancellation of iss t if not contained in the amendment i	
	<del></del>		

The date of each amendmen	t(s) adoption: O6/16/2011
	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) tere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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)
	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
	IE 16th, 2011
Signature (B)	y a director, president or other officer – if directors or officers have not been
sel	ected, by an incorporator — if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	RODOLFO ABDEL
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)