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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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Division of Corporations NAME OF CORPORATION: ARAN CUCINE FLORIDA CORP DOCUMENT NUMBER: P 11 0000 29503 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: STELLA Navas ARAN CUCINE FLORIDA

Firm/Company 1855 GRIFFIN ROAD SUITE B-236 DANTA BEACH FL 33 004 City/ State and Zin Code Stellancuase a mail. com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please calk 954) 3306757 Stella Naugs at (954) 6382720

Name of Contact Person Area Code & Daytime Telephone Number 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 enclosed) Certified Copy (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassec, FL 32301

Clifton Building

2011 SEP 13 PM 4: 20
SECRETARY OF STATE
TALLAHASSEE, FLORID

## Articles of Amendment to Articles of Incorporation of

ARAN CULTNE F	FLORTDA	CORP	
(Name of Corporation as currently			_
P11.000	029503		
(Document Number of	of Corporation (if k	nown)	-
Pursuant to the provisions of section 607,1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes, this	Florida Profit Corpora	tion adopts the following
A. If amending name, enter the new name of the		N/A	The new
name must be distinguishable and contain the wabbreviation "Corp.," "Inc.," or Co.," or the designame must contain the word "chartered," "profession	gnation "Corp," "i	Inc," or "Co". A profes or the abbreviation "P.A.	ssional corporation ."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD		NA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B)	<u>ox</u> )	NA	
D. If amending the registered agent and/or registered agent and/or the new registered		s in Florida, enter the na	ime of the
Name of New Registered Agent:	,	7	
New Registered Office Address:	(Florida stree	t address)	
	, Florida		a
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Relievely accept the appointment as registered agent.	I am familiar with	and accept the obligation	
Signati	ALE OF INEW REGISTER	eu agent, ij 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)

	Name	<u>Address</u>	Type of Act
		1326 Canaly	
President	t Massimo	Island Drive Leston Fl 333	'[] Remove
cietary	Covaltion		
		4	
			Add  Remove
			L1 Remove
E. If amendi	ng or adding additional Articles, e	nter change(s) here:	
(attach ada	litional sheets, if necessary). (Be s	pecific)	4
	•		
	1,000		
F. If an ame	ndment provides for an exchange.	reclassification, or cancellation	of issued shares.
provision	endment provides for an exchange, as for implementing the amendmen	reclassification, or cancellation t if not contained in the amenda	of issued shares, nent itself:
provision	endment provides for an exchange, s for implementing the amendmen applicable, indicate N/A)	reclassification, or cancellation t if not contained in the amenda	of issued shares, nent itself:
provision	s for implementing the amendmen	reclassification, or cancellation t if not contained in the amends	of issued shares, nent itself:
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provision	s for implementing the amendmen	reclassification, or cancellation t if not contained in the amends	of issued shares, nent itself:

The date of each amendment(s) adoption: August 28th
Effective date if applicable: 521-6 M et 6 Th
Effective date if applicable: (date of adoption is required)  (no more than 90 days after amendment file date)
·
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated September 2-2011
Signature  (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – it in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
MR. ANTONIO CONZALEZ (Typed or printed name of person signing)
TYPES IN ENT.