

P11000069994

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : AMBAR DIAZ, P.A.
Account Number : I20110000016
Phone : (305) 476-8100
Fax Number : (305) 476-8788

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TALLAHASSEE, FLORIDA

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Email Address: _____

COR AMND/RESTATE/CORRECT OR O/D RESIGN
CUBA EXPRESS PARCEL, INC.

Certificate of Status	0
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TALLAHASSEE, FLORIDA

Amend

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CUBA EXPRESS PARCEL, INC.

DOCUMENT NUMBER: P11000069994

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

AMBAR DIAZ
Name of Contact Person

AMBAR DIAZ, P.A.
Firm/ Company

43 EUCALYPTUS DRIVE
Address

HIALEAH FL 33010
City/ State and Zip Code

cochopy@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AMBAR DIAZ at (305) 476-8100
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 & 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)

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

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

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Articles of Amendment
to
Articles of Incorporation
of

CUBA EXPRESS PARCEL, INC.

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

P11000069994

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

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**)

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:

Name of New Registered Agent: DULCE ELBA TUNDIDOR

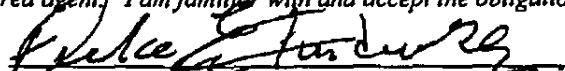
10260 NW 135th ST

New Registered Office Address: (Florida street address)

HIALEAH GARDENS, Florida 33018
(City) (Zip Code)

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.


Signature of New Registered Agent, if changing

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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>	<u>Address</u>	<u>Type of Action</u>
<u>P</u>	<u>JAMES TUNDIDOR</u>	<u>43 EUCALYPTUS SR</u> <u>HIALEAH FL 33010</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGR</u>	<u>ANTONIO D. CORTES</u>	<u>101003 NW 52ND TERRACE</u> <u>DORAL FL 33178</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>P</u>	<u>DULCE ELBA TUNDIDOR</u>	<u>10260 NW 135 ST</u> <u>HIALEAH GARDENS</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

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The date of each amendment(s) adoption: 10/03/2011
(date of adoption is required)

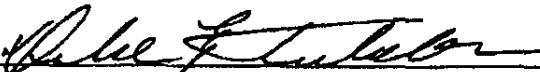
Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- 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)
- 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 10/03/2011

Signature 
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

DULCE ELBA TUNDIDOR
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

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