P110000088409

(Re	equestor's Name)	
(Address)		
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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11/28/11--01036--002 **25.00

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11 DEC -8 PM 3: 20

Anund 12/8/11

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: ARUK Acquisitio	n, Inc.	
DOCUMENT NUMBI	ER: <u>P11000088409</u>		
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
Alicia	Medina	ame of Contact Person	
	/ IN	ame of Contact Ferson	
<u>Jarvis</u>	& Associates, P.A.		
		Firm/ Company	
1550 N	Madruga Avenue, Suite 220		
		Address	
Corol	Gables, Florida 33146		
Cotat		ty/ State and Zip Code	······
		•	
am@ja	rvislaw.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Alicia Medina		at (305) 448-4848
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment 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)
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 assee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 1, 2011

ALICIA MEDINA JARVIS & ASSOCIATES, P.A. 1550 MADRUGA AVENUE - SUITE 220 CORAL GABLES, FL 33146

SUBJECT: ARUK ACQUISITION, INC.

Ref. Number: P11000088409

We have received your document for ARUK ACQUISITION, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The fee to file your document is \$35.

There is a balance due of \$10.00.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 611A00026902

11 DEC -8 AM 9: 03 ALLAHASSEE FLONDA Corrected that Inchard

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with	the Florida Dept. of State)	
P11000088409		
(Document Number of Corporat	ion (if known)	
Pursuant to the provisions of section 607.1006, Florida Statuamendment(s) to its Articles of Incorporation:	ntes, this Florida Profit Corporation	adopts the following
A. If amending name, enter the new name of the corporation	<u>'n:</u>	
The new name must be distinguishable and contain the word "abbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional association".	Corp," "Inc," or "Co". A profession	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable:		SION OFC
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		of co
		PM .
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade		of the 20
Name of New Registered Agent:		
(Florid	da street address)	
New Registered Office Address:	, Florida,	(Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami	iliar with and accept the obligations of	the position.
Signature of New Registe	ered Agent, if changing	

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)		<u>Name</u>		Address
1) <u>CP</u>		Alfonso C. Rey		P.O. BOX 025486 Miami, Florida 33102
2) <u>D</u>		Nestor Bringas	_	1851 NW 68th Avenue Building 706, Suite 225 Miami, Florida 33126
3)			_	
4)				
5)				
6)			_	
If REMOVING	G an office	er and/or director, please list the	title(s) and	I name of the officer/director to be removed:
Title(s)	<u>Name</u>		Title(s)	<u>Name</u>
1)			4)	· ·
2)		·	5)	
3)			6)	

f amending or adding addition attach additional sheets, if necess	sary). (Be	specific)			
		·-·			
				 	
	•				
					, . <u>.</u>
·				 	
·				 	
					·····

	vides for an exchange, reclassification, or cancellation of issued shares, tenting the amendment if not contained in the amendment itself:
(if not applicable, i	
G H	,
	
he date of each amendm	ent(s) adoption: November 14, 2011
ne date of each amendm	enit(s) adoption: 140vember 14, 2011
ffective date <u>if applicabl</u>	e: November 14, 2011
	(no more than 90 days after amendment file date)
doption of Amendment(s) (<u>CHECK ONE</u>)
aoption of Amenament	(CHECK ONE)
The amendment(s) was/	were adopted by the shareholders. The number of votes cast for the amendment(s)
	/were sufficient for approval.
•	
The amendment(s) was/	were approved by the shareholders through voting groups. The following statement
must be separately prov	ided for each voting group entitled to vote separately on the amendment(s):
um 1 c	
	otes cast for the amendment(s) was/were sufficient for approval
hv	(voting group)
· · · · · · · · · · · · · · · · · · ·	(voting group)
	(**************************************
The amendment(s) was/	were adopted by the board of directors without shareholder action and shareholder
action was not required.	
_	
	were adopted by the incorporators without shareholder action and shareholder
action was not required.	
Dated No	vember 14, 2011
Signature	
Signature	(By a director, president or other officer – if directors or officers have not been
	selected, by an incorporator f if in the hands of a receiver, trustee, or other court
	appointed fiduciary by that fiduciary)
	Alfonso C. Rey
	(Typed or printed name of person signing)
	(-)[
	Chairman
	Chairman (Title of person signing)