## P11000091320

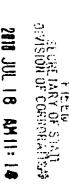
(R	equestor's Name)	
(A	ddress)	<del></del>
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(C	ity/State/Zip/Phone #	)
PICK-UP	☐ WAIT	MAIL
	_	_
(B	usiness Entity Name	)
(C	ocument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	o Filing Officer:	





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3370 Mary Street Miami, FL 33133

Telephone: (305) 859-6050

Fax: (305) 859-6051

July 17, 2018

Via Fedex **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## RE: Filing Fee for Articles of Amendment FL Corporations

To whom it may concern,

Enclosed for your processing, please find Check No. 9391 in the amount of \$665.00 for the Amendment filing fee of the following Corporations:

- Castillo Arg. Inc. \$35.00
- Diversified Investments of Florida Corp. \$35.00
- The Silver Plate of Miami Inc. \$35.00
- Zadini 88 Inc. \$35.00
- Zzicardi Inc. \$35.00
- 88 Warnes Inc. \$35.00
- Manadi Inc. \$35.00
- Caro Mio Corp. \$35.00
- Kydodro Inc. \$35.00
- CEDX Corp. \$35.00
- Interam Investments Corp. \$35.00
- XED Corp. \$35.00
- Lauderdale Portfolio Corp. \$35.00
- Citi5 Corp. \$35.00
- Anarida Inc. \$35.00
- Danizzi Corp. \$35.00
- 2001 Enterprises Corp. \$35.00
- Kydala Inc. \$35.00
- Red Saturn Properties Corp. \$35.00

For any questions, please feel free to contact our office at 305-859-6050.

Kind regards,

Camille Carreras Legal Secretary

## **COVER LETTER**

ALECEETARY OF STATE OF CORPORATE SET

TO: Amendment Section Division of Corporations AI : IIMA 81 JUL HIS

NAME OF CORPORA	ATION: CASTILLO ARG	INC	
DOCUMENT NUMBE			
	"Amendment and fee are su	bmitted for filing.	
Please return all correspondent	ondence concerning this ma	tter to the following:	
C	AROLYN KAHL		
_		Name of Contact Perso	n
R	OCA GONZALEZ P.A.		
_	<u>.</u>	Firm/ Company	<u>-</u>
3.	370 MARY STREET		
_		Address	
N	11AM1, FL 33133		
_		City/ State and Zip Cod	e
CKALI	GBCDA COM		
CKAHI	_@RGPA.COM	sed for future annual report	notification!
	E-man address, (to be to	sed for future annual report	nonneation
For further information of	concerning this matter, pleas	se call:	
CAROLYN KAHL		305	859.6050
Name of	Contact Person	Area Co	) 859.6050 de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:
S35 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 diment Section on of Corporations lox 6327 assee, FL 32314	Ameno Divisio Cliftor	Address  Iment Section on of Corporations  Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FIEED SECRETARY OF STATE DIVISION OF CORPORATIONS

CASTILLO ARG INC	28H JUR 8 1 MU 15
(Name of Corporatio	n as currently filed with the Florida Dept. of State)
P11000091320	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration;
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the a	! "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD)	<u>RESS</u> )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	r)
(Mailing address MAI BE A POST OFFICE BOX	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
Her Register ou Office Russ ess.	(City) (Zip Code)
N. D. Januari America Cinneture if showing Dog	istored Agent:
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent:  I am familiar with and accept the obligations of the position.
Signe	ature of New Registered Agent, if 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)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; 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, Treasurer, 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 Dog	2	
X Remove	Y	Mike Jon	<u>ies</u>	
X Add	<u>sv</u>	Sally Sm	<u>ith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) X Change	VPS		RICARDO D. CAROZZI	1040 EAST 3RD STREET
Add				HIALEAH, FL 33010
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		<del></del>		
Add				
Remove				
5) Change		<del></del>	_	
Add				
Remove				
6)Change		_		
Add				
Remove				

main additional photos, if hocostally,	cles, enter change(s) here: (Be specific)	
		<u> </u>
		<del></del>
		- <del></del>
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares adment if not contained in the amendment itself:	<u>5.</u>
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)	· · · · · · · · · · · · · · · · · · ·	
(if not applicable, indicate N/A)	· · · · · · · · · · · · · · · · · · ·	
(if not applicable, indicate N/A)	· · · · · · · · · · · · · · · · · · ·	
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	•	
Effective date if applicable:	(no more than 90 days after amendment file date)	<del></del>
	(no more than 90 days after amenament file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided j	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
by		
*/ <u> </u>	(voting group)	
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
	1th 2018	
Signature C	a director, president of other officer - if directors or officers have not been	
selec	a director, president of other officer – if directors or officers have not been cied, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	
	RICARDO D. CAROZZI	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	