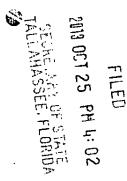
P/2000005526

| (Requestor's Name) | | | | | | |
|---|--|--|--|--|--|--|
| _ LUNEOD CORP. | | | | | | |
| _ LUNEOD CORP. 10090 NW 145 17 | | | | | | |
| (City/State/Zip/Phone #) | | | | | | |
| PICK-UP WAIT MAIL | | | | | | |
| (Business Entity Name) | | | | | | |
| (Document Number) | | | | | | |
| (Boodinon: Namisor) | | | | | | |
| Certified Copies Certificates of Status | | | | | | |
| Special Instructions to Filing Officer: | | | | | | |
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Office Use Only



10/17/13--01007--006 **35.00



10/28/13



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 30, 2013

Ida Carolina Mazza Martin 10090 SW 145 St Miami, FL 33176

SUBJECT: LUREDO CORP. Ref. Number: P12000005526

We have received your document for LUREDO CORP., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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) 245-6050.

Letter Number: 513A00022940

Annette Ramsey Regulatory Specialist II

www.sunbiz.org

COVER LETTER

| TO: Amendment Section Division of Corpo | | | | | |
|---|---|--|--|--|--|
| NAME OF CORPOR | ATION: Luredo Co | orp. | | | |
| DOCUMENT NUMB | ER: P120000055 | 526 | | | |
| The enclosed Articles of | of Amendment and fee are sul | bmitted for filing. | | | |
| Please return all corresp | pondence concerning this mat | tter to the following: | | | |
| | lda Carolina M | azza Martin | | | |
| Name of Contact Person | | | | | |
| - | | Firm/ Company | | | |
| | 10090 SW 145 | • • | | | |
| | Miomi El 221 | Address | | | |
| - | Miami, FL 3317 | City/ State and Zip Cod | e | | |
| icm | ım309@gmail.d | | | | |
| <u></u> | | ed for future annual report | notification) | | |
| For further information | concerning this matter, pleas | عالوه م | | | |
| _ | | | | | |
| | a Mazza Martin | at (<u> </u> | 721 6606 | | |
| Name o | f Contact Person | Area Co | de & Daytime Telephone Number | | |
| Enclosed is a check for | the following amount made p | payable to the Florida Depa | 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) | | |
| | ing Address ndment Section | | Address ment Section | | |

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation of

| The new porated" or the abbreviation name must contain the |
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| The new |
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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)

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 Doe | |
|----------------------------|--------------|---------------------------|-------------------------------------|
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add Remove | <u>S</u> | Ida Carolina Mazza Martin | 10090 SW 145 St. Miami, FL 33176 |
| 2) Change | | | |
| Remove 3) Change Add | | | |
| Remove 4) Change Add | | | |
| Remove 5) Change Add | | | |
| Remove 6) Change Add | | | |
| Remove | | | |

| | (Be specific) |
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| an amendment provides for an excl provisions for implementing the ame | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A) | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| rovisions for implementing the ame | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
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| provisions for implementing the ame | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |

| 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) | |
| 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. | |
| Signature Juna Mayor | |
| Signature Juabillaron | _ |
| 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) | _ |
| Renato Mazza | |
| (Typed or printed name of person signing) | |
| Director | |
| (Title of person signing) | |