## P12000025567

(Re	equestor's Name)	
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DIVISION OF CORPERATIONS

AMMA 3 54/2

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: EL ARCA [	DE LA SUPERV	IVENCIA INC
DOCUMENT NUM	BER: P1200002556	57	
	s of Amendment and fee are su		
Please return all corre	espondence concerning this ma	tter to the following:	
	MACALVCONZ	^	
	MAGALY GONZ		<u> </u>
	M&M ACCOUNT	Name of Contact Person	
		Firm/ Company	
	5370 PALM AVE		
,		Address	
	HIALEAH FL 330	12	
	,	City/ State and Zip Cod	e
GC	ONZALEZ1948@Y		
		sed for future annual report	notification)
	is man address. (to ob a	ou for fatare annual report	The transfer of the transfer o
For further information	on concerning this matter, pleas	se call:	
MAGALY GO	NIZALEZ	205	EE7 1660
		at ( 305	_ <sub>.)</sub> 557 1662
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	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)
Am	iling Address endment Section ision of Corporations	Amend Divisio	Address Iment Section on of Corporations
	Box 6327		Building
I all	lahassee, FL 32314		xecutive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

EL ARCA DE LA SUPERVIVE	NCIA INC		<del></del>	
(Name of Corporation as current	y filed with the Florida	Dept. of State)		
P12000025567				
(Document Number	r of Corporation (if know	1)		
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	rida Statutes, this <i>Florida</i>	Profit Corporation adopts the follow	wing amend	ment(s) to
A. If amending name, enter the new name of the	e corporation:			
			The n	ew
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	orp," "Inc," or "Co". z	ompany," or "incorporated" or the 4 professional corporation name mu	e abbreviati ist contain i	ion the
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A				
			_ 	01%
	<del></del>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)		70 N	45°
	<u></u>		— თ უ	
			— <b>3</b>	33.00 24.7
			••.	芸
D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered agent ag		Florida, enter the name of the	7	Ž.
Name of New Registered Agent	·			
	(Florida street addr	ess)		
New Registered Office Address:	,	, Florida		
New Registerea Office Address:	(City)	, Florida(Zip Code)		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen		d accept the obligations of the positio	n.	
,		Year Garage Transfer		
Signature of	f New Registered Agent i	f 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 Doc	
X Remove	V	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add XXXX Remove	VP	REINIER AGUILA VERA	16891 NW 122 ND AVE HIALEAH FL 33018
2) Change Add Remove	VP	RENIEL AGUILA VERA	16891 NW 122 ND AVE HIALEAH FL 33018
Change Add XXXX Remove	<u>vÞ</u>	OMAR OLIVA	16891 NW 122 ND AVE HIALEAH FL 33018
4) Change Add Remove	VP	OSMAR OLIVA	16891 NW 122 ND AVE HIALEAH FL 33018
5) Change Add Remove	<del></del>		
6) Change Add Remove			

an amendment provides for an exching the amer (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
-	

The date of each amendment(s) adoption: March 19, 2012
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)
(voing 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 03/19/2012
Signature Chambles PRESIDENT DIRECTOR
(By a director, resident 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)
MANUEL GUERRA
(Typed or printed name of person signing)
PRESIDENT DIRECTOR
(Title of person signing)