# P1200033901

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 12 AHIO: S

C. LEWIS
SEP 1 9 2013
EXAMINER

## 1.5

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Division of Corporation	7113			
NAME OF CORPORAT		HOLLYWOOD C	CORP	
The enclosed Articles of A	mendment and fee are su	bmitted for filing.		
Please return all correspond	dence concerning this ma	tter to the following:		
RO	DBERTO E MA	СНО		
		Name of Contact Person	1	
M	ACHO & ASOC	CIADOS CONSU	ILTING CORP	
		Firm/ Company		
11	10 BRICKELL	AVE STE 800		
		Address		
MI	AMI FL 33131			
		City/ State and Zip Cod	e	
<del></del>		sed for future annual report	notification)	
For further information cor	ncerning this matter, pleas	se call:		
ROBERTO E MACHO			, 503-2700	
Name of Contact Person Area Code & Daytime Telephone Nu		de & Daytime Telephone Number		
Enclosed is a check for 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)	
Mailing Address  Amendment Section  Division of Corporations		Amend Divisio	Address ment Section on of Corporations	
P.O. Box Tallahas:	see, FL 32314	Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

#### **Articles of Amendment** to Articles of Incorporation of

FILED

13 SEP 12 AM 10: 52

### SUMMER HOLLYWOOD CORP

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

P1	20	M	በበ	13	30	nn:	1

(Document Number of Corporation (if known)

nt(s) to

N/A	e corporation:		The
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	orp," "Inc," or "Co". A profess		
B. Enter new principal office address, if applicate Principal office address MUST BE A STREET A			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u> )		
D. If amending the registered agent and/or reginew registered agent and/or the new register		enter the name	e of the
Name of New Registered Agent			
	(Florida street address)		
	(Civ)	, Florida	(Zip Code)
New Registered Office Address:	(5)(9)		



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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>		FABIOLA K CELENTANO	710 NE 77 STREET
X Romovo				MIAMI FL 33138
Remove				
2) X Change	<u>P</u>		PEDRO I TRONGE	710 NE 77 STREET
Add				MIAMI FL 33138
Remove				
3) Change		_		
Add				
Remove				
4) Change		_	·	
Add				<del> </del>
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	cles, enter change(s) here:
N/A	(ве ѕресіліс)
IN/A	<del></del>
	<u> </u>
F. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)  N/A	
IN/A	



The date of each amendment(s) adoption:	FILED	if other than the
date this document was signed.	13 CED 10	
Effective date if applicable:	13 SEP 12 AM 10: 52	
(no more than 90 d	lays after amendment file date RY DF STATE ALLAHASSEE, FLORIDA	
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the shareholders. The nuby the shareholders was/were sufficient for approval.	umber of votes cast for the amendment(s)	
☐ The amendment(s) was/were approved by the shareholders throug must be separately provided for each voting group entitled to vot		
"The number of votes cast for the amendment(s) was/were s	ufficient for approval	
by	"	
(voting group)		
☐ The amendment(s) was/were adopted by the board of directors wi action was not required.	thout shareholder action and shareholder	
☐ The amendment(s) was/were adopted by the incorporators withou action was not required.	t shareholder action and shareholder	
9/09/2013		
Signature Pedro Su	- euse	
(By a director, president or other officer selected, by an incorporator – if in the happointed fiduciary by that fiduciary)	- if directors or officers have not been ands of a receiver, trustee, or other court	
PEDRO I TRO	NGE	
(Typed or prin	ted name of person signing)	
VP		
(Title	of person signing)	