## P12000011565

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



300278588093

11/04/15--01023--004 \*\*43.75

15 NOV -1 FIT 3: 32

NOV 0 5 2015

R. White

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: \_\_\_\_ ISEM C.A. CORP. P12000041565 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LUZ MARINA HERNANDEZ Name of Contact Person ACCOUNTING & INCOME TAX SERVICES CORP. Firm/ Company 5532 SW 164 PLACE Address MIAMI, FL 33185 City/ State and Zip Code HECTOR1860@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: HECTOR E. RODRIGUEZ Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee **■**\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

15 MOV -4 PH 3: 32

ISEM C. A. CORP.

(Name o	of Corporation as currently filed	d with the Florida Dept. of State)	
P12000041565			ali whip
	(Document Number of Corpo	poration (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Florid</i>	da Profit Corporation adopts the following amen	ndment(s) to
A. If amending name, enter the new na	nme of the corporation:		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc." or "Co".	company," or "incorporated" or the abbrevi A professional corporation name must contai	new ation in the
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>			_
C. Enter new mailing address, if appliance (Mailing address MAY BE A POST)  D. If amending the registered agent and appliance in the second se	OFFICE BOX)	n Florida, enter the name of the	
new registered agent and/or the new	w registered office address:	<del></del>	
Name of New Registered Agent	JUAN RAMON RODRIGUEZ		
	16175 GOLF CLUB RD APT 20	204	
	(Florida street add	dress)	
New Registered Office Address:	WESTON	, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if ce I hereby accept the appointment as registered.		and accept the obligations of the position.	

Signature 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)

Example:

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 <math>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.

<u>X</u> (	Change	<u>PT</u>	John Doe	
<u>X</u> F	Remove	<u>V</u>	Mike Jones	
<u>x</u>	Add	<u>sv</u>	Sally Smith	
Type (Che	e of Action eck One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) _	Change	RA	BLANCAS SANDOVAL & ASSOC	12555 ORANGE DRIVE, #4058
_	Add			DAVIE, FL 33330
_	K Remove			
2) _	Change	RA	JUAN RAMON RODRIGUEZ	16171 GOLF CLUB RD APT 204
<u> </u>	K Add			WESTON, FL 33326
	Remove			
3)	Change			
	Add			
_	Remove			
4) _	Change			
	Add			
_	Remove			
5) _	Change			
_	Add			
_	Remove			<del> </del>
6) _	Change			
_	Add			
	Remove			

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
· · · · · · · · · · · · · · · · · · ·	
	<del></del>
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an amendment itself:
	<del>-</del>
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption: date this document was signed.	, if other than the	
Effective date if applicable:  (no more than 90 days after amendment file date)	<u> </u>	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	I not be listed as the	
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 east for the amendment(s) was/were sufficient for approval		
by (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 (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)  JUAN RAMON RODRIGUEZ		
(Typed or printed name of person signing)		
REGISTERED AGENT		
(Title of person signing)		