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SECRETARY OF STATE

JUN 04 2012

J. LEMIEUX

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: EL CIELO	O AZUL NIGHT CLUB INC
DOCUMENT NUMBER: P12000004	5716
The enclosed Articles of Amendment and fee ar	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
CELIA MEDEL	.IN
	Name of Contact Person
EL CIELO AZU	JL NIGHT CLUB INC
	Firm/ Company
1319 NW 36TH	H ST
-	Address
OKEECHOBE	E FL 34974
·	City/ State and Zip Code
milco1980@hotma	ail.com
E-mail address: (to b	be used for future annual report notification)
For further information concerning this matter, p	please call:
CELIA MEDELLIN	at (863 ) 634-9300
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

(Name of Corporation as currently filed with the Florida Dept. of State) EL CIELO AZUL NIGHT CLUB INC (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address <u>MUST\_BE\_A\_STREET\_ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with 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)

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)	Title	Name	Address
1) Change	<u>Р</u>	CELIA MEDELLIN	1319 NW 36TH ST OKEECHOBEE FL 34974
2) Change Add Remove			
3 ) Change Add Remove		_	
4) Change Add Remove	•		
5) Change Add Remove		_	
6) Change Add Remove		_	

attach d	ding or adding additional A additional sheets, if necessar	y). (Be specific	<i>2)</i>		
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provisi	nendment provides for an eions for implementing the a not applicable, indicate N/A	mendment if no	sification, or ca t contained in t	ncellation of issu he amendment i	<u>ied shares,</u> tself:
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The date of each amendment(s) ac	doption:	5	22	112	
Effective date <u>if applicable</u> :					
	(no more ti	han 90 da	ıys after	amendment file	date)
Adoption of Amendment(s)	(CHECK ONE)				
☐ The amendment(s) was/were add by the shareholders was/were su		. The nur	nber of	votes cast for the	e amendment(s)
☐ The amendment(s) was/were app must be separately provided for					
"The number of votes cast	• •				
by 1	(voting group)			,,,	
	(voting group)				
☐ The amendment(s) was/were add action was not required.	opted by the board of dire	ectors with	hout sha	reholder action a	and shareholder
The amendment(s) was/were add action was not required.	opted by the incorporator	s without	sharehol	lder action and s	hareholder
Dated_05/22/	2012				
Signature	M				
(By a d	frector, president or othe d, by an incorporator – if ted fiduciary by that fidu	in the ha			
	CELIA MEDEI	LLIN			
	(Typed or pri	inted nam	e of pers	son signing)	
	PRESIDENT				
	(Title of p	erson sig	ning)		-