P12-0000 45716

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

Office Use Only



400260373624

05/27/14--01004--031 **35.00

JUN 11 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: El Cielo Azul Night Club, Inc. DOCUMENT NUMBER: P12000045716 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Dina Hampton Name of Contact Person Elite Office Services Of Okeechobee, LLC Firm/ Company 302 NW 5th Street Address Okeechobee, FL 34972 City/ State and Zip Code dina@eliteofficeservicesllc.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Dina Hampton 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 enclosed) (Additional Copy 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

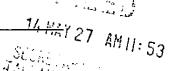
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

El Cielo Azul Night Club, Ind	E١	Cielo	Azul	Night	Club,	Inc
-------------------------------	----	-------	------	-------	-------	-----

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

P12000045716



ment(s) to

1 120000437 10			<u> </u>
(Document Number of Corp	oration (if known)		HALLAHASSLE,
Pursuant to the provisions of section 607.1006, Florida Stat ts Articles of Incorporation:	utes, this <i>Florida Profit</i> (Corporation adopt	ts the following amends
A. If amending name, enter the new name of the corpor	ation:		
			The ne
name must be distinguishable and contain the word "c "Corp.," "Inc.," or Co.," or the designation "Corp," "I word "chartered," "professional association," or the abbr	nc," or "Co". A profes:	" or "incorporat sional corporatio	ed" or the abbreviati n name must contain t
Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADDRES</u>	<u>ZS</u>)		
. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
 If amending the registered agent and/or registered of new registered agent and/or the new registered offic 		enter the name o	of the
•	C HOUT CSSI		
Name of New Registered Agent			
(Florida street address)		
New Registered Office Address:	(0)	, Florida	
	(City)		(Zip Code)
lew Registered Agent's Signature, if changing Register	ed Agent:		
hereby accept the appointment as registered agent. I am		the obligations of	the position.
Signature of New Re	gistered Agent, if changi	าย	

address of each Offic (Attach additional she Please note the officer P = President; V= Vi Executive Officer; CF held. President, Treas Changes should be no	er and/or Deets, if necess, of necess, of necess, of the ceep of t	irector cary) e by the ; T= Ti Financie or would llowing orporat	being added: e first letter of the office title: reasurer; S= Secretary; D= Directo al Officer. If an officer/director hol d be PTD. manner. Currently John Doe is list tion, Sally Smith is named the V and	ch officer/director being removed and title, name, and or: TR= Trustee; C = Chairman or Clerk, CEO = Chie olds more than one title, list the first letter of each official ted as the PST and Mike Jones is tisted as the V. There is is. These should be noted as John Doe, PT as a Change	f રો
X Change	<u>PT</u>	John 1	<u>Doe</u>		
X Remove	<u>V</u>	<u>Mike</u>	<u>Jones</u>		
X Add	<u>sv</u>	Sally	<u>Smith</u>		
Type of Action (Check One)	Title		Name	Address	
1) Change	MGR	1	Arturo Medellin	1770 NW 6th St	
Add				Okeechobee, FL 34972	
Remove					
2) Change		_			
Add					
Remove					
3) Change		_			
Add				Warrance III	
Remove					
4) Change	-	_			
Add					
Remove					
5) Change	<u></u>	_			
Add					
Remove					
6) Change					
Add					
Remove					

Attach addition	r adding additional Ar and sheets, if necessary)	. (Be specific)	- WATEL SOAR F.		
	· · · · · · · · · · · · · · · · · · ·				
			. <u>.</u>		
If an amendme	ent provides for an ex	change, reclassifi	cation, or cancel	lation of issued sh	ares,
(if not ap	r implementing the an plicable, indicate N/A)	nenament ii not e	ontained in the a	mendment usen:	
**	,				
	- N - N				

The date of each amendment(s) adoption: 5/23/14 date this document was signed.	_, if other than the
E/02/14	
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)	
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 <u>5-23-2014</u> Signature <u>Celia medelli</u>	
Signature Celia medellin	_
(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)	
Celia Medellin	
(Typed or printed name of person signing)	_
President	_
(Title of person signing)	_

14 HAY 27 AM II: 53