

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((HI4000140940 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : HISPANUSA INC

Account Number : 120070000099

Phone : (954) 478-2706

Fax Number : (954) 934-0334

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address pleases

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN HERIBERTO GONZALEZ, INC.

JUN 16 2014

R. WHITE

Certificate of Status	0
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Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section Division of Corporations							
NAME OF CORPORATION: HERIBERTO GONZALEZ INC							
DOCUMENT NUMBER: P12000046282							
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
HERIBERTO GONZALEZ							
	Name of Contact Person						
Firm/ Company							
	Address						
3743	3743 MIL LANE CIR. GREENACRES, FL 33463						
		City/ State and Zip Cod	e e				
	usa@hotm						
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
RUTH CHANERER at 954 934 01 94 Name of Contact Person Area Code & Daytime Telephone Number							
Name of Contr	act Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:							
•	\$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 Ad		Street Address					
Amendment Section Division of Corporations		Amendment Section Division of Corporations					
P.O. Box 6327 Clifton Building							
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301							

門底的 Articles of Incorporation All LAMASSES

HERIBERTO GONZALEZ INC

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

P12000046282

(Document Number of Corporation (if known)

Amending name, enter the new name of the EATIVE POOL COPIN	G INC	
must be distinguishable and contain the v .," "Inc.," or Co.," or the designation "Co "chartered," "professional association," or t	rp," "Inc," or "Co". J	
ter new principal office address, if applica	37	743 MIL LANE CI
cipal office address MUST BE A STREET AD		REENACRES, FL
	33	3463
ter new mailing address, if applicable: uiling address MAY BE A POST OFFICE	ROX)	
and namess hard being con ordizer		
		lorida, enter the name of the
		Plorida, enter the name of the
v registered agent and/or the new register		Plorida, enter the name of the
emending the registered agent and/or registered agent and/or the new register Name of New Registered Agent		
registered agent and/or the new register	ed office uddress: /Florida street addre	rss)
v registered agent and/or the new register Name of New Registered Agent	ed office uddress:	riss)
registered agent and/or the new register Name of New Registered Agent	ed office uddress: /Florida street addre	rss)

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 : Trustec; 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 numed 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> Pr</u>	John D	pe	
X Remove	<u>v</u>	Mike J	<u>ones</u>	
X Add	S <u>V</u>	Sally S	mith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	Ρ		DIANY N. JIMENEZ	3743 MIL LANE CIR.
Add		_		GREENACRES FL 33463
Remove				
2) Change	VP	_	HERIBERTO GONZALEZ	3743 MIL LANE CIR
Add				GREENACRES FL 33463
Remove				
3) Change				
				entered to the second of the s
Remove				·
4) Change		_		
Add				
Remove				
5) Change				
Add		_		
Remove				
_				
6) Change		_		
Add				
P. maya				

f amending or adding additional A Mach additional sheets, if necessary	r). (Be specific)	· · · · · · · · · · · · · · · · · · ·		
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an amendment provides for an ex	<u>cchange, reclassificat</u>	<u>lon, or cancellation</u>	of issued shares.	
provisions for implementing the ar	mendment if not cont	<u>sined in the amend</u>	ment itsen:	
(if not applicable, indicate N/A)	1			
	\$11,			
			-	
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The date of each amendment(s) ad	option: <u>U4/28/2014</u>	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopty the shareholders was/were suf	oted by the shareholders. The number of votes east for the amendment(s) ficient for approval.	
	roved by the shareholders through voling groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	**	
	(voting group)	
I he amendment(s) was/were adopt action was not required.	sted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	oted by the incorporators without shareholder action and shareholder	
Dated 04/28/20	14	
Dated	VD	
Signature		
(By a diffuselected,	ector, president or other officer - if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diductory by that fiductory)	
,,	ICDIDEDTO CONTAL ET	
	HERIBERTO GONZALEZ	
	(Typed or printed name of person signing)	
V	/P	
_	(Title of person signing)	