P/2000070629

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SECRETARY OF STATE
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12-5-13
De

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: 1221 SEAC	COAST CORP.		
DOCUMENT NUMI	BER: P1200007062	29		
	of Amendment and fee are su			
Please return all corre	spondence concerning this ma	tter to the following:		
	Angelica L Beltra	n		
		Name of Contact Persor	n	
	BELTRAN ACCO	DUNTING SERV	ICES CORP	
	Firm/ Company			
	6303 BLUE LAGOON DR SUITE 400			
Address				
	MIAMI FL 33126			
	*****	City/ State and Zip Cod	e	
. ما م	altuan @ h altuan a a a			
abe	eltran@beltranacc			
	n-man address; (to be us	sed for future annual report	nouncation)	
For further information	n concerning this matter, pleas	se call:		
Angelica L Beltran		at (305	_, 456-1999	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:	
S35 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		Street	Address	
	endment Section		lment Section	
	sion of Corporations	Division of Corporations		
	Box 6327 ahassee, FL 32314		Building Executive Center Circle	
I uti		20071 1	and an a control office	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

1221 SEACOAST CORP

(Name of Corporation as currently	filed with the Florida Den	t. of State)	-
P12000070629		,	
(Document Number of	f Corporation (if known)		-
Pursuant to the provisions of section 607.1006, Floric its Articles of Incorporation:	da Statutes, this Florida Pro	ofit Corporation adopts the followin	g amendment(s) to
A. If amending name, enter the new name of the c	orporation:		
			_The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	p, " "Inc, " or "Co". A pr		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD			-
			<u> </u>
			胃胃气
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BE	0Y))	1 June 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(muning maress MAT BEAT OST OTTICE BO	<u></u>		S I Ti
			S 5
			50 50
D. If amending the registered agent and/or registered new registered agent and/or the new registered		ida, enter the name of the	, (*)
	romee address.		
Name of New Registered Agent		 	
	(Florida street address)		
New Registered Office Address:		. Florida	
Hen Registered Office Address.	(City)	(Zip Code)	-
	•		
New Registered Agent's Signature, if changing Re	aistanad Aganti		
I hereby accept the appointment as registered agent.		cept 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 <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.

Example: X Change	<u>PT 1</u>	ohn Doe	
X Remove	<u>V</u> <u>N</u>	Mike Jones	
<u>X</u> Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DS	SILVANA CHURBA	5161 COLLINS AVE
Add			APT 1006
Remove			MIAMI BEACH, FL 33140
2) Change	D	NATALIO CHURBA	5161 COLLINS AVE
Add			APT 1006
Remove			MIAMI BEACH, FL 33140
3) Change	PT	MANDALIA CORP	VIA ESPANA 122
Add			TORRE DELTA PISO 14
Remove			CIUDAD DE PANAMA - PA
4) Change	SD	ALEJANDRO TRACHTER	6841 COMMERCE AV
✓ ∧dd			EL PASO, TX 79915
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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			_	
:				
an amendment provides for an excharge in an excharge in a second i	inge, reclassificat dment if not cont	ion, or cancellati ained in the ame	on of issued shar ndment itself:	<u>es,</u>
				<u> </u>
·				

The date of each amendment(s) ac	doption:	, 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)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	proved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required. Dated_11/07/26	opted by the incorporators without shareholder action and shareholder	
Signature	<u> </u>	<u> </u>
	frector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ted fiduciary by that fiduciary)	
	NATALIO CHURBA	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	