P12000082506

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



000242952300

12/26/12--01044--004 **35.00

Amens



IJAN 0 2 2013 T. ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LOMIBEST	INC			
DOCUMENT NUMBER: P12000082506				
The enclosed Articles of Amendment and fee are suf-	bmitted for filing.			
Please return all correspondence concerning this mat	ter to the following:			
JEREMIAS MAR	TORELL			
	Name of Contact Person	1		
LOMIBEST INC				
	Firm/ Company			
11046 W FLAGLE	ER ST			
	Address			
MIAMI, FL 33174				
	City/ State and Zip Code	2		
INFO@MARTORELL	OFFICE.COM			
E-mail address: (to be us	ed for future annual report	notification)		
For further information concerning this matter, pleas	e call:			
JEREMIAS MARTORELL	at (786	5867927		
Name of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for the following amount made p	payable to the Florida Depo	artment of State:		
\$35 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section In of Corporations Building Executive Center Circle Inssee, FL 32301		

Articles of Amendment to Articles of Incorporation of

TALLAMASSEE FLORIDA

LOMIBEST INC

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

P12000082506

(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:

			The ne
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp." word "chartered," "professional association," or the a	" "Inc," or "Co". A profe.		
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDI</u>			
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	O	· · · · · ·	
		.	
 If amending the registered agent and/or registere 		, enter the name	
new registered agent and/or the new registered o	ffice address:		of the
	ffice address:		<u>e of the</u>
			<u>e of the</u>
			(Zip Code)

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 Doc 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 De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	Р		MIJARES MENTADO, MARIA A	11046 W FLAGLER ST
Add				MIAMI, FL 33174
X Remove				
2) Change	Р		LOZAN M , FRANCISCO	11046 W FLAGLER ST
X				MIAMI, FL 33174
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		- 		
Remove				

amending or adding additional Artic ttach additional sheets, if necessary).		
<u> </u>		
		
		•
an amendment provides for an excha	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	NAME OF THE PARTY	

The date of each amendment(s) ad-	option: 12/20/2012
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 adop by the shareholders was/were suf	nted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting 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)
	(voting group)
☐ The amendment(s) was/were adoption was not required.	oted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adoption was not required.	oted by the incorporators without shareholder action and shareholder
Dated_12/20/2	2012
selected	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)
	MIJARES MENTADO, MARIA A
•	(Typed or printed name of person signing)
	P
-	(Title of person signing)
STATE OF FLORIDA - COUNTY OF The foregoing instrument was acknowled day of Declary 20 10 , by 100 Notary Signature Notary Name Printed Personally Known or ID produced	DANIELA M. P. MARTORELL Notary Public - State of Florida My Commission & EE 191053 Bended Through National Matery Assa.