Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Email	Address		
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JUL 22 2014

COR AMND/RESTATE/CORRECT OR O/D RESIGN C. CARROTHERS MINAMERICA CORP

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Sc Division of Cor			
NAME OF CORPO	DRATION: MINAMERICA C	ORP	
	4BER: P12000084798		
	ex of Amendment and fee are so		
Please return all corr	respondence concerning this ma	atter to the following:	
	MARCELO IDOYAGA		
		Name of Contact Perso	0
	PRESIDENT		
		Firm/ Company	
	6187 NW 167ST STE H40		
		Address	
	MIAMI, FL 33015		
		City/ State and Zip Cod	ę
LE	NSUR-ACCOUNTING@LIVE	LCOM	
·	E-mail address: (to be u	sed for future annual report	notification)
For further informati	ion concerning this matter, plea	se call:	
MARCELO IDOY/	NGA	at (de & Daytime Telephone Number
Namo	of Contact Person	Arca Co	de & Daytime Telephone Number
Enclosed is a check :	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fcc	☐\$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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314		Amend Divisio Clifton 2661 E	Address ment Section of Corporations Building secutive Center Circle

Articles of Amendment to Articles of Incorporation of

MINAMERICA CORP	
· · · · · · · · · · · · · · · · · · ·	tly filed with the Florida Dept. of State)
P12000084798	of Corporation (if known)
·	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendme
A. If amending name, enter the new name of the corporation:	
A. If amending name, enter the new name of the corporation.	77
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or word "chartered," "professional association." or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, if applicable:	6187 NW 167 ST STE H40
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33015
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6187 NW 167 ST STE H40
1000000	MIAMI, FL 33015
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address	<u>:\$5:</u>
Name of New Registered Agent	
(Florida	sireel address)
New Registered Office Address:	, Florida
WEN WESIGHER ONLE MINNESS.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	r 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)

Example:

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 un 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.

X Change	<u>P</u> T ,	John Doe	
X Remove	y 1	Mike Jones	
_X Add	SY.	Sally Smith	New
Type of Action (Check One)	<u>Title</u>	Name	Address ;
X Change	P/S	MARCELO IDOYAGA	6187 NW 167 ST STE 1140
			MIAMI, FJ. 33015
Remove			
X 2) Change	T	SOLANGE SIDERO	6187 NW 167 ST STE 1140
_,			MIAMI, FL 33015
Remove			
3) Change			
Add			
Remove			
4) Change	Campton A. 19		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Fan Amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if pot contained in the amendment itself: (if not applicable, indicate NA)	If amending or adding additional Arti Attach additional sheets, if necessary),	(Be specific)
provisions for implementing the amendment if not contained in the amendment itself: (If not applicable, indicate N/A)	, , ,	
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	(if not applicable, indicate N/A)	
	termination to the second second	
		

07/22/2015	11:17	FAX	3054562810
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В

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The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes east for the amendment(s) approval.
	the shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):
"The number of votes east for the am	endment(s) was/were sufficient for approval
by(v	ning group)
The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the action was not required.	c incorporators without shareholder action and shareholder
07/21/2015 Dated	with-
(By a director, prosecuted, by an in	sident or other officer—if directors or officers have not been corporator—if in the hands of a receiver, trustee, or other court by by that fiduciary)
MARCEI	O IDOYAGA
	(Typed or printed name of person signing)
PRESIDE	
	(Title of person signing)