## P1200085377

(F	Requestor's Name)		
(/	Address)		
( <i>f</i>	Address)		
(0	City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL	
(E	Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of	Status	
Special Instructions	to Filing Officer:		
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SECRETARY OF STATE



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## **COVER LETTER**

TO: Amendment Sec Division of Corp					
NAME OF CORPO	RATION: SAMUEL C	CORTES INC			
DOCUMENT NUM	BER: P1200008537	7			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	SAMUEL CORTES INC				
		Name of Contact Perso			
	CORTES HOLDI	NG CORPORAT	TION		
	Firm/ Company				
	510 LANYARD L				
	DEBARY, FL. 32	Address 713			
		City/ State and Zip Cod	e		
JO	SE@ACCOUNTIN	NGWORKSHOP	P.COM		
		sed for future annual report			
For further information concerning this matter, please call:					
SAMUEL CO	ORTES	at ( 386	, 216-0276		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
□ \$35 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)		
	iling Address		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

## Articles of Amendment to Articles of Incorporation of

SAMUEL CORTES, INC	
(Name of Corporation as currently filed with the Flo	rida Dept. of State)
P12000085377	
(Document Number of Corporation (if I	(nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatistical Articles of Incorporation:</i>	Iorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
CORTES HOLDING CORPORATION	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address:  Name of New Registered Agent	ss in Florida, enter the na me of the
(Florida stree	( address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with a signature of New Registered Agent.  Signature of New Registered Agent.	<b>⊼</b>

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</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
Kemove			
4) Change		-	
Add			
Remove			4
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	<u>icles, enter change(s) here</u> : (Be specific)
.,	
	•
f an amendment provides for an eych	nange, reclassification, or cancellation of issued shares,
	miget terms streament of careenation of issued states;
provisions for implementing the amer	ndment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the amer	ndment if not contained in the amendment itself:
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provisions for implementing the amer	ndment if not contained in the amendment itself:

The date of each amendment(s) adoption: OCTOBER 12,2012	
Effective date if applicable: OCTOBER 9,2012	
(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( by the shareholders was/were sufficient for approval.	s)
The amendment(s) was/were approved by the shareholders through voting groups. The following statemormust be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	er
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 10/12/2012	
Signature Signature	
(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	-t
appointed fiduciary by that fiduciary)	
SAMUEL CORTES	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	