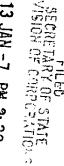
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
•
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





300242166963

01/07/13--01009--004 \*\*35.00



JAN 1 1 2013 T. BROWN

## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment to

**Articles of Incorporation** 

SECRETA	FILED PAY OF STATE CORPORATION
13 JAN	CORPORTATE
13 JAN -7	PH 2:30

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

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this $Fl$ its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:  Romanach Consumate must be distinguishable and contain the word "corporation,"	olting Corp. The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "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> ) Same As previous	5750 SW 89th Ct Miami, FL 33173
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  Some As previous	5750 SW 89th Ct. Miami, FL 33173
D. If amending the registered agent and/or registered office address:  Name of New Registered Agent	ss in Florida, enter the name of the  NO Changes same as previous
(Florida stree	t address)
New Registered Office Address: (City)	, Florida(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar 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)

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	PT John I	<u>Doę</u>	
X Remove	V Mike	Jones	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			<del></del>
2) Change Add	<del></del>		
Remove	1		
3) Change	<del></del> /		
Add	igcup		
Remove		J	<del> </del>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	<del></del>	A LANCE OF COMPANY	
Add Remove			<del></del>
Kemove			

Attach additional sh	ing additional Articles, enter change(s) here: neets, if necessary). (Be specific)
	$\alpha / A$
	1
· · · ·	
	· · · · · · · · · · · · · · · · · · ·
o	
r an amendment p provisions for imp	rovides for an exchange, reclassification, or cancellation of issued shares, lementing the amendment if not contained in the amendment itself;
(if not applica	ble, indicate N/A)
	<u>и / / n</u>
* <del>************************************</del>	

	12/29/12
The date of each amendment(s) ad	loption:I G C D I C
Effective date <u>if applicable</u> :	l
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient 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 cast	for the amendment(s) was/were sufficient for approval
by	(voting group)
•	(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.	opted by the incorporators without shareholder action and shareholder
Dated	12/28/12
Signature	A Mareo A ROMANACH
` •	irector, 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)
чррода	Marco A Romanach
	(Typed or printed name of person signing)
	CEO
	(Title of person signing)