P13000010833

| (Requestor's Name) |
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| |
| (Address) |
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| (Address) |
| , |
| (City/Chata/Zin/Dhana 40 |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| Certified Copies |
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| Special Instructions to Filing Officer: |
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OWISH OF COMPOSITIONS

15 DEC -7 AM 9: 27

DEC 10 2015 CLEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | ORATION: jorge Santana corp. | | | |
|--|---|---|--|--|
| | 4BER: p13000010833 | | | |
| The enclosed Article | es of Amendment and fee are sub | omitted for filing. | | |
| Please return all corr | respondence concerning this mat | ter to the following: | | |
| | jorge Santana | | | |
| | | Name of Contact Person | 1 | |
| | jorge Santana corp. | | | |
| | | Firm/ Company | | |
| | 6415 2nd Ave west | | | |
| | | Address | | |
| | Bradenton,fl.34209. | | | |
| | | City/ State and Zip Code | 2 | |
| jorg | gesantana 1963@yahoo.com | | | |
| - | E-mail address: (to be use | ed for future annual report | notification) | |
| For further informati | ion concerning this matter, please | e call: | | |
| jorge Santana | | at (| 920-1197 | |
| Name of Contact Person | | Area Code & Daytime Telephone Number | | |
| Enclosed is a check | for the following amount made p | ayable to the Florida Depa | irtment 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) | |
| Mailing Address | | | Address | |
| | mendment Section | Amendment Section | | |
| Division of Corporations P.O. Box 6327 | | Division of Corporations Clifton Building | | |
| Tallahassee, FL 32314 | | 2661 Executive Center Circle | | |

Tallahassee, FL 32301

SECRETARY OF STATE
DIVISION OF CORPORATION

Articles of Amendment

15 DEC =7 AM 9: 27

Articles of Incorporation of

| Jorge Santa | na Corp. | |
|---|---|--|
| (Name of Corporation as curren | atly filed with the Florida Dept. of State) | |
| | P13000010833 | |
| (Document Number | of Corporation (if known) | |
| resuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation: | is Florida Profit Corporation adopts the following amendment(| |
| If amending name, enter the new name of the corporation: | | |
| | The new | |
| me must be distinguishable and contain the word "corporati Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ord "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must contain the | |
| Enter new principal office address, if applicable: | 2105 34 Ave East | |
| rincipal office address <u>MUST BE A STREET ADDRESS</u>) | Bradenton,fl.34208 | |
| | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 6415 2nd Ave West | |
| | Bradenton,fl.34209 | |
| | | |
| If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre | | |
| Name of New Registered Agent | | |
| | | |
| (Florida s | street address) | |
| New Registered Office Address: | . Florida | |
| | (City) (Zip Code) | |
| | | |
| Designation of Agent's Cignotium if shoughs Designated Agent | -4. | |
| ew Registered Agent's Signature, if changing Registered Agentiereby accept the appointment as registered agent. I am familian | | |
| | | |
| | | |
| Gr. CM | 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 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>PT</u> | John Do | <u>e</u> | |
|-------------------------------|--------------|-------------|---------------|--------------------|
| X Remove | <u>v</u> | Mike Jo | <u>nes</u> | |
| X Add | <u>sv</u> | Sally Sn | <u>nith</u> | |
| Type of Action (Check One) | <u>Title</u> | | Name | Address |
| 1) Change | <u>s</u> | _ | WANDA SERRANO | 6415 2nd Ave West |
| X Add | | | | Bradenton,fl.34209 |
| Remove | | | | |
| 2) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | | | |
| Remove | | | | |
| O Ch | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | | |

| | (Be specific) |
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| f an amendment provides for an exch provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself: |
| f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A) | nange, reclassification, or cancellation of issued shares, and and an analysis and analysis and an analysis analysis and an analysis and an analysis analysis and an analysis |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, and and an analysis |
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| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, and and an in the amendment itself: |

| The date of each amendment(s) adoption: | , if other than the |
|--|-----------------------------|
| date this document was signed. | |
| Effective date <u>if applicable</u> : | |
| (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dat document's effective date on the Department of State's records. | e will not be listed as the |
| Adoption of Amendment(s) (<u>CHECK ONE</u>) | |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. |) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): | nt |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | 믲 |
| by" | 15 DEC |
| (voting group) | CC The |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. | 7, 7, |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | 9: 27 |
| 12/03/2015 | |
| 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 appointed fiduciary by that fiduciary) | ; |
| DORGE SANTANA | |
| (Typed or printed name of person signing) | |
| | |
| (Title of person signing) | |