Division of Corporations Department of State

Division of Corporations
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COR AMND/RESTATE/CORRECT OR O/D RESIGN LIVRO INCORPORATED

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C. LEWIS

EXAMINER

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COVER LETTER

TO: Amendment Section of Corporation of Corporation of Corporation of Corporation (Corporation)			
NAME OF CORPORATION: LIVRO INCORPORATED			
DOCUMENT NUMI	P1300002583	7 .	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	l
Please return all corre	spondence concerning this mat	tter to the following:	
	JULIO BARBOSA	4	
Name of Contact Person			
BARBOSA LAW OFFICE			
Firm/ Company			
	2000 PONCE DE	LEON BLVD. #	625
		Address	
	CORAL GABLES	s, FL 33134	
		City/ State and Zip Cod	В
JBARBOSA@BARBOSALEGAL.COM			
		sed for future annual report	
For further information concerning this matter, please call:			
JULIO BARE	OSA	at (305	421-6339 de & Daytime Telephone Number
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Enclosed is a check for the following amount made payable to the Florida Department 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)
Mai	ling Address	Street	Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

07/24/13 09:26AM PDT Barbosa Law Office -> Division of Corporations

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Articles of Amendment Articles of Incorporation

13 JUL 24 PM 2: 36 SECRETARY OF STATE TALLAHASSEE, FLORIDA

of LIVRO INCORPORATED (Name of Corporation as currently filed with the Florida Dept. of State) P13000025837 (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: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent

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.

New Registered Office Address:

Signature of New Registered Agent, if changing

Page 1 of 4

(Florida street address)

(Clty)

Florida

(Zip Code)

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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	PI	Iohn Dos	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	S	JULIO BARBOSA	2000 PONCE DE LEON BLVD. #825
X Add			CORAL GABLES, FL 33134
Remove			
2)Change		 	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		<u>.</u>	_
Add			<u></u>
Remove			
5) Change			
Add			·
Remove			
6) Change			<u> </u>
Add			
Remova			

Page 2 of 4

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I. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) VA					
1977					
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F. If an amendme provisions for (if not app	ent provides for an ex- implementing the an dicable, indicate N/A)	change, reclass	incation, or can- t contained in the	cellation of issued s amendment itse	t anares, elf:
	·				
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•		, <u></u>			
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The date of each amendment(s) a	donthous SECRETARY OF STAIRED	her than the
date this document was signed.	doption: SECRETARY OF STAFF of TALLAHASSEE. FLORIDA	
Effective date if applicable:		
•	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adby the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote reportedly on the amendment(s):	
"The number of votes our	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
-	(vating group)	
The amendment(s) was Avere ad action was not required.	lopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ad action was not required.	lopted by the incorporators without shareholder action and shareholder	
Dated July	24, 2013	
Signature		
selecte	director, prosident or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	CARLOS M. BARBOSA LIMA	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of nemon signing)	