P/3000057872

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COVER LETTER

NAME OF CORPORATION: C 3 B ENTERPRICE OF CENTRAL Florida CORP

DOCUMENT NUMBER: P13000057872

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

_	Rodoro Barrios
	Name of Contact Person
-	Bi 40
	Firm/ Company
_	2565 Davenport Circle
	Address
_	Kissimmee FL, 34746
	City/ State and Zip Code
	Rodolfo Barrios Zabala Qamail.com E-mail address: to be used for future annual report notification
	E-mail address: to be used for future annual report notification?

For further information concerning this matter, please call:

TO: Amendment Section

Cesar Bravo at (HOT) 607-0150

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee \$\sum \text{\$\sum \\$43.75 Filing Fee \\$\sum \text{\$\sum \\$}\$\$
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 Street Address

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

Articles of Amendment to Articles of Incorporation

of	
	e of Central Florida Coap
(Name of Corporation as currently filed with the Flo	rida Dep of State)
P130000 57 823	7
(Document Number of Corporation (if)	known)
(======================================	,
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the
D. D	2565 Davenport CR
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
(1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	KISSIMMEE FL 34746
C. Enter new mailing address, if applicable:	Same as above
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	_ at 400 le
D. If amending the registered agent and/or registered office addre	ss in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
Name of New Registered Agent	
(Florida stree	u address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
	4.
	59
New Registered Agent's Signature, if changing Registered Agent:	
Thereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
Signature of New Registered Ag	zent, 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.

Francis V us Remove	, ana sai	ty Sman, Sv as an Ada.
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) 1) Change Add Remove	Title P1	Name Address Rodolfo Barrios 2565 Davenport Cx Kissimmee FL 34746
2) Change Add Remove		
Change Add Remove		
4) Change Add Remove		
5) Change Add Remove		
6) Change Add Remove		

	heets, if necessary).	(Be specific)	e(s) here:		
	, ,	(- 7 - 5 - 7			
•	<u> </u>				
<u> </u>					
					
			<u></u>		
If an amendment p	provides for an exch	nange, reclassificat	tion, or cancella	tion of issued sha	res,
provisions for imp	plementing the ame	nange, reclassificate	tion, or cancellad tained in the am	tion of issued sharend sharend sharend sharend state of the sharend sh	res.
provisions for imp	provides for an exch plementing the ame ble, indicate N/A)	nange, reclassifica ndment if not con	tion, or cancellade tained in the am	tion of issued sharend	res.
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
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(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):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by <u>Cesar Bravo</u> ."	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 03 13 2014	
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)	
Cesar E Brown	
(Typed or printed name of person signing)	
TRESIDENT	
(Title of person signing)	