# 13000070859

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C. LEWIS SEP 2 6 2013 EXAMINER

## COVER LETTER

Division of Corporations NAME OF CORPORATION: Oro Transmission Corp P13000070859 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Alexander Orejuela Name of Contact Person **Oro Transmission Corp** Firm/ Company 513 South Raimbow Dr Rear Address Hollywood, Florida 33023 City/ State and Zip Code orjuelaalexander@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:  $at \, (\frac{305}{\text{Area Code \& Daytime Telephone Number}})$ Alexander Orejuela Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee **□\$43.75** Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

#### **Mailing Address**

TO: Amendment Section

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

Articles of Incorporation

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(Name of Corporation as current)		la Dept. of State)		-	
P130000	70859				
(Document Number	r of Corporation (if kno	wn)	<del></del>	-	
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	orida Statutes, this <i>Flori</i>	ida Profit Corporation	adopts the followin	g amen	.dment(s) t
A. If amending name, enter the new name of the	e corporation:				
name must be distinguishable and contain the value "Corp.," "Inc.," or Co" or the designation "Coword "chartered," "professional association," or	orp," "Inc," or "Co".	A professional corpo	porated" or the a pration name must	_ bbrevia	new ition i the
B. Enter new principal office address, if applica				_	
(Principal office address <u>MUST BE A STREET A</u>	(DDRESS)		SEC	겂	
			ARE	, SEB	-1.1
			25 N	- <u>~</u>	CONTRACTOR CONTRACTOR
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	ROV)		æ~ æ~	3	m
(Mutting uturess MAT BE A FOST OFFICE)	<u></u>			ció T	O
	<u></u>			- UT	
			D	ලා -	
D. If amending the registered agent and/or registered agent and/or the new registered		n Florida, enter the na	ame of the		
Name of New Registered Agent			_		
	(Florida street ad	(dress)			
New Registered Office Address:		, Florid		_	
	(City)		(Zip Code)		
New Registered Agent's Signature, if changing F	Registered Agent:				
I hereby accept the appointment as registered agen		nd accept the obligation	ons 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	Doe	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	<u>SV</u> Sally	v Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
l) X Change	DPTS	Alexander Orejeuela	513 South Raimbow Dr Rear
Add			Hollywood, FI 33021
Remove			
2) Change	DPTS	Alexander Orejuela	513 South Raimbow Dr Rea
X Add			Hollywood, fl 33021
Remove			
3 ) Change			·
Add			
Remove			
4) Change	· ———		
Add			<del></del>
Remove			
5) Change			
Add			
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6) Change			
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an amendment provides for a	in exchange, rec	lassification, or o	ancellation of iss	ued shares,
11 4 1 1 1 1	he amendment it	not contained in	the amendment	itself:
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rovisions for implementing the control of the contr	N/A)	•		
rovisions for implementing th	N/A)			
rovisions for implementing th	N/A)			
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rovisions for implementing th	N/A)			

The date of each amendment	(s) adoption: 09/09/2013	if other than th
date this document was signed		f other than th
Effective date <u>if applicable</u> :	09/09/2013	13 SEP 19 AM 8: 50
	(no more than 90 days after t	13 SEP 19 AM 8: 58 amendment file date) SECRETARY DE STATE TALLAHASSEE. FLORIDA
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	LORIDA
	re adopted by the shareholders. The number of vere sufficient for approval.	votes cast for the amendment(s)
	re approved by the shareholders through voting ged for each voting group entitled to vote separate	
	cast for the amendment(s) was/were sufficient f	or approval
<sub>by</sub> 100%		,11
	(voting group)	•
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without share	eholder action and shareholder
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without sharehold	der action and shareholder
Dated	09/13/2013/	
Signature _	/ /w/ w (Y	
se	y a director, president or other officer — if direct lected, by an incorporator — if in the hands of a r pointed fiduciary by that fiduciary)	
	Akrauder Or	ejvelv-
	(Typed or printed name of	of person signing)
	Dp75 (Title of person)	
	(Title of person:	signing)