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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

FEB 0 5 2016

C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: PLAMI BONANTA, INC.					
DOCUMENT NUMBER: \$\frac{1300093742}{}					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
USAMA ISSA					
Name of Contact Person					
1030 9TH ST #606					
MAM BEACH FC 33139					
City/ State and Zip Code					
E-mail address: (to be used for future amoual report notification)					
For further information concerning this matter, please call:					
USAMA 155A 11, 786, 8530207					
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 Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status (Additional Copy is enclosed)					
Mailing Address Amendment Section Street Address Amendment Section					

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation of

			20	2016
<u> </u>		ntly filed with the Florida Dept. of State)) 	ـــا
Mirmi	BUNANZA INC	DOCH P130000987	+45	E
		of Corporation (if known)	82	\sim
Pursuant to the provisions o its Articles of Incorporation		is Florida Profit Corporation adopts the follo	winginger ST 요구	idment(s
A. If amonding upper and	er the new name of the corporation:		台記	ነት :6
A. Hamenang name, em	the new name of the corporation.			
name must be distinguished	the and contain the word "cornoral	tion," "company," or "incorporated" or the	The e_abbrevia	
"Corp" "Inc.," or Co"	or the designation "Corp," "Inc," or	"Co". A professional corporation name m		
word "chartered," "profess	ional association," or the abbreviation			
B. Enter new principal of		1030 9th ST \$606		
(Principal office address <u>M</u>	<u>'UST BE A STREET ADDRESS</u>)	MIAMI BEACH FL	3313	,9
C. Enter new mailing add	tress, if applicable: BE A POST OFFICE BOX)	1020 ax 57 4606		
(Maning anaress <u>MAI</u>	<u>BE A POST OFFICE BOX</u>)	MINMI DELLIK (211	200
		MIRMI BRACH, FL	<u> </u>	
D. If amending the registe	red agent and/or registered office ad	ldress in Florida, enter the name of the		
	nd/or the new registered office addre			
Name of New Regi	stered Agent \BAMA	SSA		
	1020 944	ct 41-04		
	(Florida :	Street address)		
Al., . 14., -2.4.,	MIAMI (39ACH Florida	33139	3
<u>New Registered Of</u>	ice Adaress:	· · · · · · · · · · · · · · · · · · ·	Zip Code)	_1_
New Registered Agent's Si	gnature, if changing Registered Age nent as revistered agent - Lam familia	nt: r with and accept the optigations of the positic	an.	
r nereny troceps me appoint				
	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 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 Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	Title Name PS HASSAIN ISSA	Address
1) Change		10135 JW 167 SI MIAMI, FL 33176
Remove 2) Change	PS USAMA 155A	1030 9TH ST \$606
Add		Alami BEACH, FC 33139
3) Change		
Remove		
4) Change Add Remove		
5) Change		
Add		
6) Change		
P approve		

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ff an ai	nendment pro	vides for an ex	change, reck	assification, or	cancellation	of issued sha	res.	
provis	ions for imple		nendment if	not contained i			<u></u>	
			110					
			1/K					
								,

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

• The date of each amendment(s) adopti	ion: 1/29/16	, if other than the
date this document was signed.	11-2/	
Effective date <u>if applicable</u> :	1/29/14	
	(no more than 90 days after amendm	ent file date)
Note: If the date inserted in this block document's effective date on the Department.		requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes casent for approval.	t for the amendment(s)
	d by the shareholders through voting groups. It voting group entitled to vote separately on the	
"The number of votes east for the	ne amendment(s) was/were sufficient for appro	vai
by _	(voting group)	·*
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder	action and shareholder
	by the incorporators without shareholder actio	n and shareholder
action was not required.	1	
Dated	2/16	
Signature By a direct	or, preside a grother officer – if directors or of	Ticers have not been
selected, by	an incorporator - if in the hands of a receiver,	
appointed is	duciary by that fiduciary)	
	JEAMIE 1224	
	(Typed or printed name of person signing	ng)
	Wilsongar	
	(Title of person signing)	