## P13000101058

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FILED

C. LEWIS

APR 3 2014

EXAMINER

## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Gomiamivdz. corp DOCUMENT NUMBER: P13000101058 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Alberto J Rivero Name of Contact Person Secretary Firm/ Company 7516 Hispanola Ave Address North Bay Village, Florida 33141 City/ State and Zip Code arlhr94@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Alberto J Rivero 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 ■\$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 enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## APPROYEG AND FILED

## Articles of Amendment to Articles of Incorporation of

14 APR -1 PM 1:18

Gomiamivdz. Corp (Name of Corporation as currently filed with the Florida Dept. of State) P13000101058 (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 The 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." B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (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: Gerardo A Valle Rodriguez Name of New Registered Agent 7562 NW 175 St (Florida street address) Florida 33015 Hialeah New Registered Office Address: (City) 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.

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>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	PD	Gerardo A M Rodrig	nuez		
Add			Hialeah, FL 33015		
Remove					
2) Change	PD	Gerardo A valle Roc	riguez 7562 NW 175 St		
<b>✓</b> Add			Hialeah, FL 33015		
Remove			<del></del>		
3) Change	<del></del>	_			
Add					
Remove					
4) Change		····			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add			_		
Remove					

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



The date of each amendment(s) adoption:date this document was signed.	14 APR - I	PH 1: 18	, if other than the
	SECRETAR	Y OF STATE SEE, FLORIDA	
(no m	ore than 90 days after amendment file	date)	
Adoption of Amendment(s) (CHECK C	ONE)		
The amendment(s) was/were adopted by the shareholders was/were sufficient for approva	lders. The number of votes cast for th	e amendment(s)	
The amendment(s) was/were approved by the shareh must be separately provided for each voting group of			
"The number of votes cast for the amendment(	s) was/were sufficient for approval		
by	,,		
(voting gro	up)		
The amendment(s) was/were adopted by the board o action was not required.	f directors without shareholder action	and shareholder	
The amendment(s) was/were adopted by the incorporaction was not required.	rators without shareholder action and s	shareholder	
Dated_03/28/2014			
Signature			<u></u>
	other officer – if directors or officers   r – if in the hands of a receiver, trustee fiduciary)		
Alberto J River	то		
	Typed <sub>f</sub> or printed name of person signif	ng)	
	(Title of person signing)		
<b>\</b>			