P14000013905

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
		-

Office Use Only



600283796876

03/31/16--01005--001 **35.00

16 MAY -3 AM 7: 55

SECRETARY OF CONTRACTIONS

MAY - 4 2016 C LEWIS



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 6, 2016

HEIKE DELGADO / HEIKE DELGADO REAL ESTATE CORP 1148 NW 133RD AVE. PEMBROKE PINES, FL 33028 US

SUBJECT: HEIKE DELGADO REAL ESTATE CORP.

Ref. Number: P14000013905

We have received your document for HEIKE DELGADO REAL ESTATE CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 316A00006962

COVER LETTER

AHM.

Mrs.

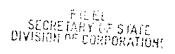
Carloyn Lewis

Rel. Real Estate

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: HEIKE DELGADO REAL ESTATE CORP				
P14000013905				
The enclosed Articles of Amendment and fee are submitted for filing.				
lease return all correspondence concerning this matter to the following:				
Heike Delgado				
Name of Contact Person				
Firm/ Company				
1148 NW 133rd Ave				
Address				
Pembroke Pines, FL 33028				
City/ State and Zip Code				
heikedelgado@gmail.com				
E-mail address: (to be used for future annual report notification)				
or further information concerning this matter, please call:				
Name of Contact Person at (630) 464 5610 Area Code & Daytime Telephone Number				
Name of Contact Person Area Code & Daytime Telephone Number				
inclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee				
Matting Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Control of Corporations Control of Control of Corporations Control of Contro				

Articles of Amendment to Articles of Incorporation of



HEIKE DELGADO REAL ESTATE CORP

16 MAY -3 AM 7: 55

(Name of Corporati	ion as currently filed with the Florida Dept. of State)
P14000013905	
(Досил	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:
HEIKE C. DELGADO STRAUSS P.A.	The new
	rd "corporation," "company," or "incorporated" or the abbreviation b," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADL</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>
D. If amending the registered agent and/or register new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street uddress)
New Registered Office Address:	. Florida
New Registered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and accept the obligations of the position.
Sign	nature 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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				· · · · · · · · · · · · · · · · · · ·
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

. If amending o	r adding additional Articles nal sheets, if necessary). (B EState Sa	, enter change(s) h le specific) しんら	nere:		
				,	
			·		
	 				
					
					
		•			
		 			
.					
provisions fo	ent provides for an exchang implementing the amendm plicable, indicate N/A)	e, reclassification, tent if not contain	or cancellation o	f issued shares, ent itself:	
				·	
			<u> </u>	 	
	 				

The date of each amendment(s) adoption	n:	, if other than the
date this document was signed.		SECRETARY LASTAIL DIVISION OF CORPORATIONS
Effective date if applicable:		
	(no more than 90 days after amendment file date)	16 MAY -3 AM 7: 55
Note: If the date inserted in this block d document's effective date on the Department	oes not meet the applicable statutory filing requirements, tent of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted b by the shareholders was/were sufficien	y the shareholders. The number of votes cast for the amend t for approval.	ment(s)
	by the shareholders through voting groups. The following stating group entitled to vote separately on the amendment(s)	
"The number of votes cast for the	amendment(s) was/were sufficient for approval	
by	,,,	
, 	(voting group)	
☐ The amendment(s) was/were adopted b action was not required.	y the board of directors without shareholder action and shar	eholder
☐ The amendment(s) was/were adopted b action was not required.	y the incorporators without shareholder action and sharehold	der
APRIL 29TH, 20 Dated	de Desads	
selepted, by a	, president or other officer – if directors or officers have not n incorporator – if in the hands of a receiver, trustee, or othe uciary by that fiduciary)	been er court
HEIK	E DELGADO	
	(Typed or printed name of person signing)	
PRES	IDENT	
	(Title of person signing)	