# P14000068916

(Re	equestor's Name)	
· (Ac	idress)	
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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

TO: Amendment Sec Division of Corp				= <del>-</del>
NAME OF CORPO	RATION: FINA ENT	ERPRISES COF	RPORATION	SEP/SEP
DOCUMENT NUM	<sub>BER:</sub> P1400068916	3		— 6 6 7
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riease return an corre	espondence concerning this ma	itter to the following:		
	GUILLERMO DIA	AΖ		
		Name of Contact Perso		<del></del> _
	MASTER ACCO			
	40044 0144 4071	Firm/ Company		
	10041 SW 40TH		<u>-</u>	
	MIANI EL COLO	Address		
	MIAMI, FL. 33165			
		City/ State and Zip Cod	e	
MA	STERTAXEXPA	@GMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)	_
For further information	n concerning this matter, pleas	se call:		
GUILLERMO	DIAZ	<sub>at (</sub> 786	, 6834521	
Name	of Contact Person	Area Co	de & Daytime Telephone	Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee	
, and the second	Certificate of Status	Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)	
<u>Ма</u>	iling Address	(Additional copy is enclosed)  Street	Certified Copy (Additional Copy is enclosed)  Address	
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<u>Ma</u> Amo Div	iling Address	(Additional copy is enclosed)  Street Amend Division	Certified Copy (Additional Copy is enclosed)  Address	

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

# FINA ENTERPRISES CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State)

P14000068916

(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:

- · ·	tion," or the abbrevia	ition "P.A."	ration name must o
Enter new principal office address, Principal office address MUST BE A ST		N/A	
Enter new mailing address, if appli-	cable:	N/A	
(Mailing address <u>MAY BE A POST (</u>	<u>OFFICE BUX)</u>	<del></del>	
If amending the registered agent annew registered agent and/or the new	d/or registered office v registered office ad	address in Florida, enter the na dress:	me of the
If amending the registered agent an	d/or registered office	address in Florida, enter the na dress:	me of the
If amending the registered agent and new registered agent and/or the new	d/or registered office v registered office ad N/A	ldress:	me of the
If amending the registered agent and new registered agent and/or the new	d/or registered office v registered office ad N/A	e address in Florida, enter the na ldress: ida street address)	_

# 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 hange,

a change, Mike Jones Mike Jones, V as Rem	leaves the c ove, and Sai	orporation, Sally Smith is named the V an lly Smith, SV as an Add.	d S. These should be noted	as Ighn Doe LT as a Ci
Example: X Change	<u>PT</u>	John Doe		SEP TO
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	INTE ORIDA
(1) Change		N/A		<del></del>
Remove				
2) Change				
Remove				
3) Change				
Remove				
4) Change				
Remove				
5) Change	<del></del>			
Add Remove				
6) Change				
Add				

. If amending or adding additional Articles, enter change(s) here:	ALL THE SECOND
(Attach additional sheets, if necessary). (Be specific)	
I/A	n de
	(2)
	<del></del>
If an amendment provides for an exchange, reclassification, or cancellation of is	sued shares,
provisions for implementing the amendment if not contained in the amendment (if not applicable, indicate N/A)	itself:
<u>'A</u>	
	·

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)	14 SEP
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.	5 5
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):	<b>T</b>
"The number of votes cast for the amendment(s) was/were sufficient for approval	μ ω
by"  (voting group)	
(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 09/08/2014	
Signature parties of the state	
(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)	_
JOSEFINA TONDO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	_



## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 28, 2014

GUILLERMO DIAZ MASTER ACCOUNTANTS, PA 10041 SW 40TH STREET MIAMI, FL 33165



SUBJECT: FINA ENTERPRISES CORPORATION

Ref. Number: P14000068916

We have received your document for FINA ENTERPRISES CORPORATION 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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) 245-6838.

Cheryl R McNair Regulatory Specialist II

Letter Number: 414A00018463

