P14000068998

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





600276285306

09/14/15--01002--011 **35.00



SEP 1 6 2015 C McNAIR

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: INVERSION	ES E INMOBILIA	RIA L&L 51 CORP	-1880 in Te
DOCUMENT NUMI	D1400006900			
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		ر در
	Amanda Jaramille	0		
		Name of Contact Person	1	
	J.A. Accounting S	Services Inc		
		Firm/ Company		<u>-</u>
	8906 W Flagler S	st # 219		
		Address		
	Miami, Fl 33174			
		City/ State and Zip Cod	e	
am	andajara@hotma	il com		
		sed for future annual report	notification)	_
For further informatio	n concerning this matter, pleas	se call:		
Name	of Contact Person	at (at Co) de & Daytime Telephone Ni	ımber
	or the following amount made			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

Articles of Amendment Articles of Incorporation of

INVERSIONES E INMOBILIARIA L&L 51, CORP

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

- 4						
P 1	41)()	OU	เกษ	gc	ìΧ

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607,1006, Flaits Articles of Incorporation:	orida Statutes, this <i>Flori</i>	da Profit Corporation ado	pts the following amendm
A. If amending name, enter the new name of the	he corporation:		
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp," "Inc," or "Co".	A professional corporati	
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE			
D. If amending the registered agent and/or reg new registered agent and/or the new registe		n Florida, enter the name	of the
Name of New Registered Agent			
	(Florida street ad	ddress)	
New Registered Office Address:	(Civ.)	, Florida	(Tr. C. In)
	(City)		(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		and accept the obligations	of the position.
Signature o	of New Registered Agent	t, 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	Р	Amanda I Jaramillo	8906 W Flagler St # 219		
Add			Miami, Fl 33174		
Remove					
2) Change		_			
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

If amending or adding additional Artic Attach additional sheets, if necessary).	(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, endment if not contained in the amendment itself:
	, <u> </u>

date this document was signed.	_, if other than the
·	
Effective date if applicable: (no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
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.	
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):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
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.	
Signature Sun and Journills	
(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)	_
Amanda Jaramillo	
(Typed or printed name of person signing)	_
P	_
(Title of person signing)	