

P140000069701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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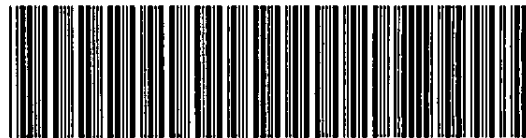
(Business Entity Name)

(Document Number)

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 OCT 16 AM 10:57

C Lewis  
10-28-14



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 10, 2014

CAROLINE LARSON / LARSON ACCOUNTING & CONSULTING SERV  
8615 COMMODITY CIRCLE SUITE 06  
ORLANDO, FL 32819 US

SUBJECT: SILVER HORSE INVESTMENTS CORP  
Ref. Number: P14000069701

We have received your document for SILVER HORSE INVESTMENTS 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 document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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: 614A00021786

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: SILVER HORSE INVESTMENTS CORP

DOCUMENT NUMBER: P14000069701

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CAROLINE LARSON

Name of Contact Person

LARSON ACCOUNTING AND CONSULTING SERVICES

Firm/ Company

8615 COMMODITY CIRCLE STE 06

Address

ORLANDO / FLORIDA 32819

City/ State and Zip Code

PRIVATE@LARSONACC.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CAROLINE LARSON

Name of Contact Person

at ( 407 ) 3703686

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 &  
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

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

14 OCT 16 AM 10:57

SILVER HORSE INVESTMENTS CORP

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

P14000069701

(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:

*The new 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 MUST BE A STREET ADDRESS)

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:

Name of New Registered Agent \_\_\_\_\_

\_\_\_\_\_  
(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

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 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:**

☒ Change      PT      John Doe  
  
☒ Remove      V      Mike Jones  
  
☒ Add      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	P	PRIMA PATRIMONIAL E AGRICOLA LTDA	8528 MOREHOUSE DR ORLANDO, FL 32836
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	D	ANA SALETE JULIANO FERREIRA	8528 MOREHOUSE DR ORLANDO, FL 32836
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	D	MARIA SALETE JULIANO DURAN	8528 MOREHOUSE DR ORLANDO, FL 32836
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

**E. If amending or adding additional Articles, enter change(s) here:**

*(Attach additional sheets, if necessary). (Be specific)*

**ARTICLE VI:**

CORRECT INCORPORATOR NAME FROM

ANA SALETE JULIANA FERREIRA

TO

ANA SALETE JULIANO FERREIRA

**ARTICLE VII**

CORRECT INITIAL OFFICER TO:

PRIMA PATRIMONIAL E AGRICOLA LTDA.

8528 MOREHOUSE DRIVE

ORLANDO, FL 32836 U.S.

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

*(if not applicable, indicate N/A)*

THE NAME OF THE PRESIDENT IS INCOMPLETE.

CORRECT THE PRESIDENT MEMBER NAME TO

PRIMA PATRIMONIAL E AGRICOLA LTDA

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

14 OCT 16 AM 10: 57

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 \_\_\_\_\_  
(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 SEPTEMBER 25th, 2014

Signature

(By a director, president, or other officer, if directors or officers have not been selected, by an incorporator, or if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

ANA SALETE JULIANO FERREIRA

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)