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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: NESTOR	BARROS PA			
DOCUMENT NUMBER: P140000818	06			
The enclosed Articles of Amendment and fee are s	submitted for filing.			
Please return all correspondence concerning this m	natter to the following:			
BARROS, NEST	FOR			
	Name of Contact Person			
NESTOR BARR	OS PA			
Firm/ Company 16850 COLLINS AVE STE 105				
	Address			
SUNNY ISLES E	BEACH, FL 33160			
	City/ State and Zip Code			
E-mail address: (to be	used for future annual report notification)			
For further information concerning this matter, ple	ase call:			
	at ()			
Name of Contact Person	at () Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made	e payable to the Florida Department of State: 🗸			
\$35 Filing Fee \$\text{Certificate of Status}\$	□\$43.75 Filing Fee & □\$52.50 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



NESTOR BARROS PA

14 OCT 17 PH 2: 07

(Name of Corporation as	currently filed with the Florid	la Dept. of State)		
P14000081806				
(Documen	nt Number of Corporation (if kno	wn)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Flori</i>	ida Profit Corporation	adopts the following	amendment(s) to
A. If amending name, enter the new na	me of the corporation:			
				The new
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co".	A professional corp	rporated" or the abo oration name must co	breviation ontain the
B. Enter new principal office address, (Principal office address MUST BE A S				
	-			
	_			
C. Enter new mailing address, if appli				
(Mailing address <u>MAY BE A POST</u>)	<u>DFFICE BOX</u>)			
	-			
D. If amending the registered agent an new registered agent and/or the new		in Florida, enter the n	ame of the	
Name of New Registered Agent	JOSE NESTOR DOS S	SANTOS BARRO	s	
	16850 COLLINS A	VE STE 105		
	(Florida street ac			
New Registered Office Address:	SUNNY ISLES BE	ACH , Flori	_{da_} 33160	
	(City)	 	(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agent:	\cap		
I hereby accept the appointment as regist		and accept the obligati	ons of the position.	
	///	M. 1.		
Si	gnature of New Registered Agen	A. 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	BARROS, JOSE NESTOR	16850 COLLINS AVE
Add		DOS SANTOS	STE 105
Remove			SUNNY ISLES BEACH, FL
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	7		
Add Add			
Remove			
6) Change			
Add			
Remove			

	ecessary). (Be s	ter change(s) here: pecific)		
		. .		
			· - · · · · · · · · · · · · · · · · · · 	
				
				
				
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		<u> </u>		
	•			
				
provisions for implementing	<u>ig the amendment</u>	eclassification, or confidence in	uncellation of issued the amendment itsel	shares,
If an amendment provides for implementing (if not applicable, indicated)	<u>ig the amendment</u>	eclassification, or c if not contained in	incellation of issued the amendment itself	shares, <u>:</u>
provisions for implementing	<u>ig the amendment</u>	eclassification, or c if not contained in	uncellation of issued the amendment itsel	shares,
provisions for implementing	<u>ig the amendment</u>	eclassification, or call if not contained in	ncellation of issued the amendment itsel	shares,
provisions for implementing	<u>ig the amendment</u>	eclassification, or c	uncellation of issued the amendment itsel	shares,
provisions for implementing	<u>ig the amendment</u>	eclassification, or c	uncellation of issued the amendment itsel	shares,
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provisions for implementing	<u>ig the amendment</u>	eclassification, or c	uncellation of issued the amendment itsel	shares,
provisions for implementing	<u>ig the amendment</u>	eclassification, or c	incellation of issued the amendment itsel	shares,

The date of each amendment(s) add	ontian:	in the second of	CU OF STATE ORPORATIONS	, if other than the
date this document was signed.	option:	- SMORENE OF		_, ii other than the
Effective date if applicable:		14 OCT 17	PM 2: 07	
Entervie date in applicable.	(no more than 90 t	days after amendment file dat	(e)	_
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adop by the shareholders was/were suff		umber of votes cast for the an	nendment(s)	
The amendment(s) was/were appromust be separately provided for e				
"The number of votes cast for	or the amendment(s) was/were	sufficient for approval		
by		•••		
	(voting group)			
The amendment(s) was/were adop action was not required.	oted by the board of directors w	ithout shareholder action and	shareholder	
The amendment(s) was/were adopaction was not required.	oted by the incorporators withou	it shareholder action and share	eholder	
Dated	115/14	_ N		
Signature	ector, president or other office	My .	not how	-
selected,	by an incorporator – if in the diduction diduction by that fiduction diduction by the fiduction of the diduction of the diduction diduct			
<u>.</u>	JOSE NESTOR	bos SANTOS	SBARRO	2S
	(1 yped of prii	REVIDE	VT	
_	(Title	of person signing)		_