PH 00083593

(Re	questor's Name)			
(Ad	dress)			
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(Cit	ty/State/Zip/Phone	e #)		
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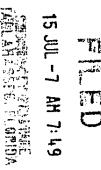




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07/07/15--01031--019 **70.00

07/07/15--01031--020 **17.50



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COVER LETTER

TO: Amendment Section **Division of Corporations**

> P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPOR	ATION: ZUBE	ROA ENTERPRISES, I	NC.	71.5
DOCUMENT NUMB	ER: <u>P1400083593</u>) y (3-13-5a)	器
The enclosed Articles of	of Amendment and fee are so	ubmitted for filing.		, T.
Please return all corres	pondence concerning this ma	atter to the following:		
	Raul A. de la Ca	umpa		
-		Name of Contact Perso	n	-
	R.A. de la Campa	, CPA, P.A.		
		Firm/ Company		_
	444 Brickell Ave	e. Ste. 51-430		
-		Address		_
	Miami, FL 33131			
~		City/ State and Zip Cod	le	_
<u> </u>	FSA1971@hotmail. E-mail address: (to be u	.com sed for future annual report	notification)	
	•		,	
For further information	concerning this matter, plea	se call:		
Raul A. c	le la Campa	at (_305	431-7749	
Name of Contact Person			de & Daytime Telephone Numbe	er
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
	_	-	_	
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ng Address		Address	
	ndment Section ion of Corporations		lment Section on of Corporations	
	Box 6327		Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Zuberoa Enterprises, 1	Inc.		神像		
(Name of Corporation	as currently fi	led with the Florida Dept. of Sta	te)	I	O
P14000083593			CD 75	<u>-</u> j	
(Documer	nt Number of Co	orporation (if known)	:5		1
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	tatutes, this <i>Fla</i>	orida Profit Corporation adopts th	e followin	g amer	ndment(s) to
A. If amending name, enter the new name of the corr	oration:				
				_The	new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co	". A professional corporation ne	or the a ime must	bbrevio contair	ation n the
B. Enter new principal office address, if applicable:		18021 Biscayne B	lvd.		
(Principal office address <u>MUST BE A STREET ADDR</u>	ESS)	Apt. 1902			
		Aventura, FL 33	160		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX))	18021 Biscayne B	ilvd.		
		Apt. 1902			
	•	Aventura, FL 33	:160 ⁻		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		s in Florida, enter the name of th	<u>ie</u>		
Name of New Registered Agent		Christian Vicent	e Gueva	ara	
		2801 N.E. 183rd	St. Api	t. 70	9
	(Florida street			-	
New Registered Office Address:	Aventura	, Florid	اناا	160	
	(Ci	(v)	(Zip	Code)	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. It	tered Agent: am familiar with	h 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.

Examplé: X Change	<u>PT</u>	John Doe	, y
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	Marc L. Navailles	1801 S. Treasure Dr.
Add			Apt. 517
X Remove			Miami Beach, FL 33141
2) <u>x</u> Change	_P	Frederic Sanchez	18021 Biscayne Blvd.
Add			Apt. 1902
Remove			Aventura, FL 33160
3) Change	VP	Christian V. Guevara	2801 N.E. 183rd St. Apt. 709
<u>x</u> Add			Apt. 709
Remove			Aventura, FL 33160
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ification, or cancellation of issued shares, contained in the amendment itself:	
_	

The date of each amendment(s) adoption:	6/22/2015	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	6/22/2015	
((no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of Sta		this date will not be listed as the
Adoption of Amendment(s) = (CHEC	CK ONE)	र्क्टी के स्टेस्ट्रे
The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app		dment(s)
☐ The amendment(s) was/were approved by the sl must be separately provided for each voting gr	hareholders through voting groups. The following roup entitled to vote separately on the amendment	
"The number of votes cast for the amendr	nent(s) was/were sufficient for approval	
by	g group)	
(voting	g group)	
☐ The amendment(s) was/were adopted by the bo action was not required.	ard of directors without shareholder action and sha	reholder
☐ The amendment(s) was/were adopted by the incaction was not required.	corporators without shareholder action and shareho	older
6/22/15		
Dated	76	
Signature	a Charles	
/(By a director, preside	ent or other officer - if directors or officers have no	
	porator – if in the hands of a receiver, trustee, or oth	ner court
appointed fiduciary by	y that fiduciary)	
Freder	ric Sanchez	
(T _y	yped or printed name of person signing)	
Presid	lent	
	(Title of person signing)	