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COVER LETTER

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	•	COVER LETTER	•	·
TO: Amendment Section Division of Corpor				ASSESS TO
NAME OF CORPORA	ATION: AVILA & SABOO	GAL INVESTMENTS INC		7
DOCUMENT NUMBI				
	f Amendment and fee are su	bmitted for filing.		8: 28 71 19818
Please return all corresp	oondence concerning this ma	tter to the following:		3 ⁵ >
Y	OTH SABOGAL			
_		Name of Contact Person	n	- - -
Å	AVILA & SABOGAL INVE	STMENTS INC		
_		Firm/ Company		
8	912 W FLAGLER ST SUIT	E 204		
_		Address		
N	MIAMI, FL 33174			
-		City/ State and Zip Cod	e	
YOTH:	717@YAHOO.ES			
	-	sed for future annual report	notification)	•
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For further information	concerning this matter, pleas	se call:		
YOTH SABOGAL		786 at (916-0038	
Name of	Contact Person		de & Daytime Telephone Nu	mber
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	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle	

Tallahassee, Fl. 32301

Articles of Amendment to Articles of Incorporation of

AVILA & SABOGAL INVESTMENTS INC (Name of Corporation as currently filed with the Florida Dept. of State) AVILA & SABOGAL INVESTMENTS INC (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: 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 <u>MUST BE A STREET ADDRESS</u>) 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 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: 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>	<u>Name</u>	<u>Addres</u> s
1) X Change	<u></u>	YOTH SABOGAL	8912 W FLAGLER ST STE 204
Add			MIAMI, FL 33174
Remove			
2) X Change	VP	CESAR F AVILA	8912 W FLAGLER ST STE 204
Add			MIAMI, FL 33174
Remove			
3) Change	VP	ELKIN A RODRIGUEZ	8912 W FLAGLER ST STE 204
X Add			MIAMI, FL 33174
Remove			
4) Change			
Add			
Remove			
5) Change			•
Add			
Remove			
6) Change			
Add		 	
Remove			

ach <i>additional s</i>	ding additional Artsheets, if necessary).	(Be specific)				
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<u>ovisions for im</u>	provides for an exc plementing the amo	hange, reclassifi endment if not c	cation, or cancel ontained in the a	lation of issued mendment itsel	<u>shares,</u> f:	
(if not applica	able, indicate N/A)					
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4 4	04/27/2015	
The date of each amendment(s) a date this document was signed.	adoption:	, if other than the
	27/2015	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date we bepartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	proved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	lopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ac action was not required.	opted by the incorporators without shareholder action and shareholder	
	director, president or other officer – if directors or officers have not been	
	ed, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	YOTH SABOGAL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	