## P15000034798

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	-
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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15 DEC -4 PH 4: 39

DEC 8 2015 C LEWIS COVER LETTER

TO: Amendment Section Division of Corporations

PARA MI CUBA, INC.

P15000034798

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

Please return all correspondence concerning this matter to the following:

ALAIN TRISTAN

Name of Contact Person

PARA MI CUBA, INC.

Firm/ Company

5830 W FLAGLER STREET

Address

MIAMI, FL 33144

City/ State and Zip Code

REGACCOUNTING@YHAOO.COM

For further information concerning this matter, please call:

ALAIN TRISTAN

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee Certificate of Status

Certified Copy
(Additional copy is enclosed)

Area Code & Daytime Telephone Number

Area Code & Daytime Telephone Number

Area Code & Daytime Telephone Number

Area Code & Copy in the following amount made payable to the Florida Department of State:

Certified Copy (Additional Copy (Addit

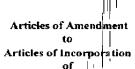
E-mail address: (to be used for future annual report notification)

**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

is enclosed)



	0	of the	13 056 -4	PH 4: 39
	PARA MI (	CUBA, INC.		
(Name of Corporation a	s carrently filed with the	Florida Dept. of S	tate)	-
	P15	00003	34798	
(Docume	nt Number of Corporation	(if known)		-
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006. Florida Statutes, this	s Florida Profit Co	rporation adopts the following	g amendment(s) t
A. If amending name, enter the new n	ame of the corporation:	:		
		+		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associal B. Enter new principal office address, (Principal office address MUST BE A S)  C. Enter new mailing address, if apple (Mailing address MAY BE A POST)	nation "Corp," "Inc," or ution," or the abbreviation if applicable: TREET ADDRESS)	"Ca". A professio		
D. If amending the registered agent an	id/or registered office add	tress in Florida. e	iter the name of the	-
new registered agent and/or the ne			res the mane of the	
Name of New Registered Agent	EMILIO P	ELAEZ		
	5830 W FLAGI	ER ST		
	(Florida si	treet address)	<del></del>	
New Registered Office Address:	MIAI	MI	, Florida 33144	
·	(Ciņ	ý	(Zip ('ode)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agen tered agent — Lam familiar	<u>t:</u> with and occept th	e obligations of the position	
	A Dela		- variations of the position.	
Si	gnature of New Registered	Agent, if changing		
		~ ~ ~ ~		

Page 1 of 4

				];' ı	
~-				ame of each office	er/director being removed and title, name, and
address of each Office (Auach additional sheet			seing aodea:	1	
Please note the officer/o			first letter of the office to	itle:	
P = President; V = Vice Executive Officer; CFC	e Presiden ) = Chief	it; T= Tre Financial	easurer; S= Secretary; Officer. If an officer/o	D= Director; TR=	Trustee; C = Chairman or Clerk; CEO = Chief e than one title, list the first letter of each office
held. President, Treasur Changes should be note				Doe is listed as the	ne PST and Mike Jones is listed as the V. There is
a change, Mike Jones le	eaves the c	corporatio	on, Sally Smith is named	the V and S. Thes	se should be noted as John Doe, PT as a Change,
Mike Jones, V as Remo					
Example:	DT	Yalaa TS		1	
X Change	<u>PT</u>	John D			
X Remove	$\underline{\mathbf{v}}$	Mike J	<u>ones</u>		
X Add	<u>sv</u>	Sally S	<u>mith</u>		
Type of Action (Check One)	Title		Name	:	<u>Addres</u> s
1) Change	Р		BENITA DE ARI	MAS	5830 W FLAGLER ST
Add				1	MIAMI, FL 33144
Remove					<del> </del>
2) Change	P		EMILIO PELAEZ	<u>7</u>	5830 W FLAGLER ST
Add		-	<del></del>	<del></del>	MIAMI, FL 33144
Remove					
3) L Change		<del></del>			
Add					
Remove					***************************************
4) Change					
Add					
Remove					
. 🗀					
5) Change		_	·	· · · · · · · · · · · · · · · · · · ·	
Add					
Remove					
6) Change		<del></del>			
Add					
Remove					

Page 2 of 4

	·
•	<b>   </b>
If amending or adding additional Articles, enter change(s)	
Attach additional sheets, if necessary). (Be specific)	;   '
% OF SHARES DISTRIBUTED AS FOLLOW:	
EMILIO PELAEZ 100%	
	<u> </u>
· · · · · · · · · · · · · · · · · · ·	1
	•
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exchange, reclassification provisions for implementing the amendment if not contain	n, or cancellation of issued shares, ned in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

Page 3 of 4

The date of each amendment(s) adoption:  date this document was signed.  11/18/2015  15 DEC -4 PH 4: 3	If other than the
Effective date if applicable: 11/20/2015	
(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.	
Dated11/18/2015	
Signature B. M. Olex	
(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)	
BENITA DE ARMAS	
(Typed or printed name of person signing)	<del></del>
PRESIDENT	
(Title of person signing)	<del></del>

Page 4 of 4