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TALLAHASSEE, FLOI

AUG 10 2015
R. WHITE

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: BODEGAS MANAGEMENT INC. DOCUMENT NUMBER: P15000055649 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **Processing Department** Name of Contact Person My Corporation Business Services, Inc. Firm/ Company 23586 Calabasas Road, Suite 102 Address Calabasas, CA 91302 City/ State and Zip Code processing@mycorporation.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **Processing Department** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to **Articles of Incorporation**

THLLD

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BODEGAS MANAGEMENT I	NC.				
(Name of Corporation as current	tly filed with the Flor	rida Dept. of Sta	te) TALLAH	ASSEE, FLOR	aDA
P15000055649					
(Document Number	er of Corporation (if k	nown)			
Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation:	orida Statutes, this FI	orida Profit Corp	oration ado	ots the following	; amendment(s) to
A. If amending name, enter the new name of the	he corporation:				
					The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp," "Inc," or "Co	o". A profession	"incorpord al corporati	nted" or the about on name must o	obreviation contain the
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)				
D. If amending the registered agent and/or reg new registered agent and/or the new register	zistered office addres ered office address:	ss in Florida, ent	er the name	of the	
Name of New Registered Agent		<u>.</u> .			
	(Florida stree	t address)			
New Registered Office Address:	(City)		_, Florida	(Zip Code)	-
	(City)			(Zip Code)	
New Registered Agent's Signature, if changing	Registered Agent:				
I hereby accept the appointment as registered ago	ent. I am familiar wi	th 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 <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.

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
Change Add Remove			
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove	<u>. </u>		

(Attach additional sheets, if necessary). (Be specific) Article III
The Purpose for which the corporation is organized is:
TO MANAGE CONVENIENCE STORES AND GAS STATIONS, AND TO PROVIDE
TECHNICAL REPAIR AND MAINTENANCE OF MOTOR VEHICLES, AND, AT THE
SAME TIME, BE ABLE TO SALE, DISTRIBUTE, AND MARKET SPARE PARTS AND
ACCESSORIES RELATED TO SUCH VEHICLES.
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 date of each amendment(s)	edoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
The amendment(s) was/vere a must be separately provided j	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	idopted by the incorporators without shareholder action and shareholder	
Dated	8/5/15	
Signature	Wasta to	
(By)	director president or other officer – if directors or officers have not been each, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	_
	Hector Contasti	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	