## P15000058312

(Re	equestor's Name)			
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## **COVER LETTER**

Division of Corporations			
NAME OF CORPORATION: Cuba Welia Group Corp.			
DOCUMENT NUMBER: 215000058313			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Name of Contact Person  Doris Accounting at an Danine Comp.  From/Company			
10154 w Flagler St Address			
Miawi, Fi 35174 City/ State and Zip Code			
E-mail address: (To be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Contact Person at (305) 480 -0369  Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:			
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)			
Mailing Address Street Address			

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

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Name of Corporation as currently filed with the Florida Dent.

(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:

ame must be distinguishable and contain the word Corp.," "Inc.," or Co.," or the designation "Corp,	," "Inc," or "Co". A profession	The incorporated" or the abbrevial corporation name must contain
ord "chartered," "professional association," or the object of the last of the	<u></u>	   <del> </del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>N/14</u>	
D. If amending the registered agent and/or register new registered agent and/or the new registered of New Registered Agent		er the name of the
	(Florida street address)	
New Registered Office Address:	(City)	, Florida(Zip Code)
The state of the s		

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) Change	$\overline{P}$	Lordan Dedeno	300 SE 15th RD Apt 124
Add		·	Miami, +1
Remove			33139,05
2) Change	<u>Q</u>	Liber Banuata	24 83rd St Apt 14
Add			Miani, +1
Remove			33141 US
3) Change			
Add			
Remove			······································
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter chang (Be specific)					
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f an amendment provides for an excl	nange, reclassific	ation, or can	cellation of	issued shar	es,	
	<u>ndment if not co</u>	ntained in th	<u>e amendme</u>	nt_itself:		
provisions for implementing the ame						
(if not applicable, indicate N/A)						
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•	/ /	
The date of each amendment(s date this document was signed.	) adoption: 1//01/2015	, if other than the
Effective date <u>if applicable</u> :		
in applicable.	(no more than 90 days after am	endment file date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory Department of State's records.	filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes sufficient for approval.	es cast for the amendment(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting gro for each voting group entitled to vote separately	ups. The following statement on the amendment(s):
"The number of votes of	ast for the amendment(s) was/were sufficient for	approval
by	(voting group)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareh	older action and shareholder
action was not required.  Dated  Signature (By selections)	adopted by the incorporators without shareholder    1	s or officers have not been eiver, trustee, or other court
The foregoing ins this <u>of a NoU</u> , a Personally Known Type of I.D. Produ		DORIS POLANCO Notary Public - State of Florida My Comm. Expires Nov 12, 2016 Commission # EE 832983 Bonded Intrough National Notary Assn.