Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H150002431993)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6380

Account Name : BUSINESS WORLD TRANSACTIONS, INC.

Account Number : 104512000707 : (305)803-2736

Fax Number Phone

: (305)381-2286

1. 1

3.00mm 和自己的证据。1

thenter the email address for this business entity to be used for future _____annual report mailings. Enter only one email address please.**

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN CARTERO EXPRESO, CORP.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	S35.00

Electronic Filing Menu

Corporate Filing Menu

Help

HILL 15 OCT -9 AH 9: 12

Articles of Amendment to o of Inc

Artic	of	TALLAHASSEE, FLORDA
	ERO EXPRESO, CORP.	
(Name of Corporation as	currently filed with the Flo	orida Dept. of State)
	P15000083193	
(Document)	Number of Corporation (if kn	own)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	utes, this <i>Florida Profit Corp</i>	poration adopts the following amendment(s)
A. If amending name, enter the new name of the corpor	ation:	
		The new
name must be distinguishable and contain the word "c "Corp" "Inc.," or Co.," or the designation "Corp," "I word "chartered," "professional association," or the abbr	'nc," or "Ca". A profession	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u>	<u></u>	,
		
		And the second second
C. Enter new mailing address, if applicable:	•	The state of the s
(Mailing address MAY BE A POST OFFICE BOX)	138.41	*************************************
		47 3
notes	·	and the second s
		N. S.
D. If amending the registered agent and/or registered of new registered agent and/or the new registered offic		er the name of the
Marie CM. D. Co. Lance	 , ,	.,
Name of New Registered Agent	0.476383	1 T 177 4 047
	Florida street address)	
·		
New Registered Office Address:	(Cly)	, Florida (Zip Code)
	 -	-

ん. Z.

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: <u>X</u> Change		<u>PT</u>	John Doe		•••
X Remove	e	v	Mike Jones		
X Add		<u>sv</u>	Sally Smith		-
Type of Ac (Check One	tion e)	Title	Name	Address	
1) C	nange	VP	IDANIA ARDON	· ·	<u>.</u>
<u>X</u> A	dđ			3942 S.W. 119 AVE.	_
	emove			MIAMI, FL. 33175	_ Remain
ere en	nange				Change
الحقيقة . منظم معادد المستخدمية .	dd			. ,	Ndar
	emove	-		and a company	
.3)C	hange	<u> </u>	_		Change
e a shannat amhili AA	dd to the state of	4.		LEG ne grande	Add .
	emove		المعادة المعاولة المتعادة المتعادة المعادة	PARTITION OF THE PARTIT	
4)Ch	nange				
- <u></u> , A (
R	emove				-
<i>5)</i> Ch	nange				-
A	dd		·		-
Re	emove				-
6)Ch	ange				_
A	dd				_
Ro	emove				_

Page 2 of 4

エロ・- ん. え.

(Attach additional sheets, if necessary). (Be specific)	
	•
The street of	
The state of the s	
Marine Compared to the Marine Compared to the	ul La
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 the medical control of the first of the medical control of

10-09-15	, if other than the
The date of each amendment(s) adoption: date this document was signed.	II Valet that the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	l not be listed as the
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	
(voting group)	-
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.	्याक्तार वर्षके हैं। स्वार अंड अप अपने के क्रिक्ट
10-09-15	Emos ()
Pmilano	Services Guardia
(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)	1
LESBIA M. ZELAYA	ALCO SECURITION OF THE PARTY OF
(Typed or printed name of person signing)	
VICE PRESIDENT	
(Title of person signing)	· vante