P10000037252

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Amend

JUN 1 4 2016 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FERRETERIA LL	UVIA C.A. INC.	
DOCUMENT NUMB	ER: P16000037252		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this mat	iter to the following:	
	JOSE GERARDO REVERO	L VARGAS	
		Name of Contact Person	·
	FERRETERIA LLUVIA C.A	. INC.	
•		Firm/ Company	
	11611 SW 128TH ST		
•		Address	
	MIAMI FL 33176-4485		
·		City/ State and Zip Code	
jose_ı	everol@hotmail.com		
	E-mail address: (to be us	ed for future annual report	notification)
		•	
For further information	concerning this matter, pleas	se call:	
JOSE GERARDO RE	VEROL VARGAS	at (307-6414
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment 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)
Ame Divi P.O.	ndment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

FERRETERIA LLUVIA C.A. INC.

(Name of Corporation as currently filed with	the Florida Dept. of State)	
P16000037252		
(Document Number of Corporatio	n (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Pro</i> its Articles of Incorporation:	fit Corporation adopts the following	ng amendment(s)
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "compa "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A pro word "chartered," "professional association," or the abbreviation "P.A."		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		·····
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	24	<u> </u>
	الله الله الله الله الله الله الله الله	
	3	,
D. If amending the registered agent and/or registered office address in Florinew registered agent and/or the new registered office address:	· ·	
•	: " : مق	φ. Η
Name of New Registered Agent	14	_
(Florida street address)		_
New Registered Office Address:	, Florida	
(City)		Code)
Non-Designated Assets Company of the sector		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and acc	cept the obligations of the position.	
Signature of New Registered A		_

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.

X Change	<u>PT</u> ·	John Doe	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	YUSMELI GONZALEZ	11611 SW 128TH ST
X Add			MIAMI, FL 33176
Remove		•	
2) Change			
Add		·	
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove	,		
5) Change			
Add		•	
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
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		and the state of t
		,
		The state of the s
		Mada a Ciano da haras
an amendment provides for an excl rovisions for implementing the ame	nange, reciassification, or cancind and the name of th	amendment itself:
(if not applicable, indicate N/A)		
· · · · · · · · · · · · · · · · · · ·		

05/15/2016	
The date of each amendment(s) adoption:	, if other than the
05/15/2016	
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 dedocument's effective date on the Department of State's records.	ate will 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(by the shareholders was/were sufficient for approval.	(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent .
"The númber 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 sharehold action was not required.	ler
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
05/20/2016 -Dated	
Signature	
selected, by an incorporator – if in the hands of a receiver, trustee, or other cou appointed fiduciary by that fiduciary)	
JOSE GERARDO REVEROL VARGAS	
(Typed or printed name of person signing)	
President	

(Title of person signing)