P16000063692

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: ZALDAES INVES	STMENTS INC.	
DOCUMENT NUM	P16000063692		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	MIRNA L. FIGUEROA		
		Name of Contact Person	n
	ZALDAES INVESTMENTS	S INC.	
•		Firm/ Company	
	6293 BLUE BAY CIRCLE	· ·	
		Address	
	LAKEWORTH, FLORIDA	33467	
		City/ State and Zip Cod	e
· MIR	NAZALDANA@YAHOO.CO	DM .	
		sed for future annual report	notification)
•			,
For further information	on concerning this matter, pleas	se call:	
MIRNA L. FIGUER	OA	at (368-5242
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)
Am Div P.C	uiling Address nendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

•	Articles of Ar	menament
•	to	orporation y filed with the Florida Dept, of State)
•	Articles of Inco	orporation 776 C
B16000062602	of	
P16000063692		
	of Corporation as currently	y filed with the Florida Dept, of State)
ALDAES INVESTMENTS INC.		
	(Document Number of	Corporation (if known)
s Articles of Incorporation:		Florida Profit Corporation adopts the following amendn
. If amending name, enter the new p	name of the corporation:	
√/A		The ne
Corp.," "Inc.," or Co.," or the design or chartered, ""professional association of the chartered, "Enter new principal office address MUST BE A.S.	nation "Corp," "Inc," or "C ation," or the abbreviation "I , if applicable:	n," "company," or "incorporated" or the abbreviation. Co". A professional corporation name must contain the P.A." SAME ADDRESS
Enter nome 212 and 14 and 16	e	
. Enter new mailing address, if app (Mailing address <u>MAY BE A POST</u>		SAME ADDRESS
Enter new mailing address, if app (Mailing address MAY BE A POST		SAME ADDRESS
	OFFICE BOX) nd/or registered office addre	ess in Florida, enter the name of the
(Mailing address MAY BE A POST If amending the registered agent a new registered agent and/or the ne	nd/or registered office address: MIPNA I FIGUEDOA	ess in Florida, enter the name of the
(Mailing address MAY BE A POST If amending the registered agent a	nd/or registered office address: MIRNA L. FIGUEROA	ess in Florida, enter the name of the
(Mailing address MAY BE A POST If amending the registered agent a new registered agent and/or the ne	nd/or registered office address: MIRNA L. FIGUEROA 6293 BLUE BAY CIRCLE	ess in Florida, enter the name of the
(Mailing address MAY BE A POST If amending the registered agent a new registered agent and/or the ne	nd/or registered office address: w registered office address: MIRNA L. FIGUEROA 6293 BLUE BAY CIRCLE (Florida street	ess in Florida, enter the name of the

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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PRES	JENNY P. ZALDANA	6293 BLUE BAY CIRCLE
Add			LAKEWORTH, FL 33467
X Remove			
2) Change	PRES	MIRNA L. FIGUEROA	6293 BLUE BAY CIRCLE
X Add			LAKEWORTH, FL 33467
Remove			
3) Change		_	_
Add			
Remove		•	
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
•			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
The con	mpany have all votes and approval for	the change of Preside	ent.		
		T 100			
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·					
pro	n amendment provides for an exchar ovisions for implementing the amend (if not applicable, indicate N/A)	ige, reclassification, Iment if not contain	or cancellation of i	ssued shares, at itself:	
N/A				······································	
					· · · · · · · · · · · · · · · · · · ·
		•	<u></u>		
					

	10/01/2016
he date of each amendment(s) ad	loption:, if other than
ate this document was signed.	
10/1 ffective date <u>if applicable</u> :	5/2016
rective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament fite date)
ote: If the date inserted in this bocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as partment of State's records.
doption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement 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)
	(voting group)
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
10/15/2016	
DatedSignature	
(By a di	rector, president or other officer - if directors or officers have not been
selected	l, by an incorporator if in the hands of a receiver, trustee, or other court
appoint	ed fiduciary by that fiduciary)
	MIRNA L. FIGUEROA
-	(Typed or printed name of person signing)
	PRESIDENT
-	(Title of person signing)