P1700000000093

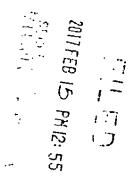
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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01/31/17--01013--023 **35.00



Amend

FEB 1 6 2017

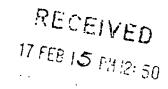
I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

ARTES ORIGINATION:	AL Y MAS INC					
P17000007093						
DOCUMENT NUMBER:	<u> </u>					
The enclosed Articles of Amendment and fee are su	abmitted for filing.					
Please return all correspondence concerning this ma	atter to the following:					
GUSTAVO R PARDO	GUSTAVO R PARDO					
ARTES ORIGINAL Y MAS	Name of Contact Person 5 INC					
4094 RAINBOW CIRCLE	Firm/ Company 4094 RAINBOW CIRCLE					
Address LABELLE, FL 33935						
	City/ State and Zip Code					
GPRADO0915@YAHOO.COI	М					
E-mail address:	(to be used for future annual report notification)	_				
For further information concerning this matter, plea	se call:					
GUSTAVO PARDO	863 234-4559					
Name of Contact Person 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	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	,				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle					

Tallahassee, FL 32301



18

February 2, 2017

GUSTAVO R. PARDO ARTES ORGINAL Y MAS INC 4094 RAINBOW CIRCLE LABELLE, FL 33935

SUBJECT: ARTES ORIGINAL Y MAS, INC

Ref. Number: P17000007093

We have received your document for ARTES ORIGINAL Y MAS, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 317A00002150

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	filed with th	ie Florida Dept.	. of State)		
Actes Original Y 1	Mas	Inc	PIT	0000	00709
(Document Number of C	Corporation ((il known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this FL its Articles of Incorporation:	lorida Profit	Corporation ad	opts the follov	ving ame	endment(s) to
A. If amending name, enter the new name of the corporation:					
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A profe			abbrev	
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)				201) FEE	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida	a, enter the nam	ne of the	15 PH 12:	17 17 17
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·	 	<u>5</u>	55 -	
(Florida street	et address)				
New Registered Office Address:	City)	·	Florida	lip Code)	<u></u>
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar wit	ith and accep	ot the obligations	s of the positio	n.	
Signature of New Reg	gistered Age	nt, 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: X Change	<u>PT</u>	John Do	<u>oe</u>		
X Remove	<u>V</u>	Mike Jones			
_X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u> V		Name ALEXANDER ARRIETA M	Address 4683 SUMMEROAK ST	
1) Change X Add	<u>-</u>	_		APT 2203	
Remove				ORLANDO, FL 32835	
2) Change		_			
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change		_			
Add					
Remove					

adding	office	ر <u>د</u> د	v P	
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rovisions for implementing	ig the amendment if no	sification, or co ot contained in	ancellation of issued shar the amendment itself:	<u>es.</u>
(if not applicable, indic	ate N/A)			
				···
<i></i>	FIN			
				<u> </u>

The date of each amendment(s) adoption: \[\langle -2 S-17 \] date this document was signed.	, if other than the
Effective date if applicable: /-25-/7	
Effective date if applicable: 1-25-17 (no more than 90 days after amendment file date)	
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)	
(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.	
Dated 01/25/2017	
Signature O//25/2017 Signature (By a director, president of other officer – if directors or officers have not been rejected by an incorporator – if in the hands of a receiver trustee, or other court	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Gustavo R Pardo (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
(Title of person signing)	
(Title of person signing)	