## P170033450

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

Office Use Only Lele3-611-1092-



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18 JAN 22 AM 7: 44
SECRETARY OF STATE
TALLAHASSEE FLORIDA

A:Mend. 01-24-18 DC



January 5, 2018

ERICK MORALES 3894 DAVIE BLVD. FT. LAUDERDALE, FL 33312

SUBJECT: CHESEMOMENT CORPORATION

Ref. Number: P17000033450

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form submitted to file the amendment is for a corporation with either benefit or social purpose status with our office. Since, we do not have your corporation listed in this manner, we are sending you the correct articles of amendment form to file with this office.

The current name of the entity is as referenced above. Please correct your document accordingly.

The registered agent must sign accepting the designation.

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.

Darlene Connell
Regulatory Specialist II Supervisor

Letter Number: 017A00025965



December 22, 2017

CESAR MAYORGA 4844 MYRTLE BAY DRIVE ORLANDO, FL 32829

SUBJECT: CHESEMOMENT CORPORATION

Ref. Number: P17000033450

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

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

The registered agent must sign accepting the designation.

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.

Claretha Golden Regulatory Specialist II

Letter Number: 017A00025965

www.sunbiz.org

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

	CHESEMOME\N	T CORP	
NAME OF CORPOR	P17000033450		<del></del>
DOCUMENT NUMB			<del></del>
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	CESAR MAYORGA		
	CHESEMOMENT CORP	Name of Contact Person	n
,	4844 MYRTLE BAY DRIVI	Firm/ Company E	
	ORLANDO FLORIDA 328	Address 829	
		City/ State and Zip Cod	e
ZOS	SMORALES@GMAIL.COM	1	
	E-mail address: (	to be used for future annua	l report notification)
For further information	n concerning this matter, pleas	se call:	
ERICK MORALES		786	290-2951
Name o	of Contact Person	at (at (	de & Daytime Telephone Number
Enclosed is a check for	r 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)
Mailing Address			Address
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			on of Corporations n Building
			Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment on

	247
	Articles of Incorporation
	of
CHESEMOMENT CORPURATION	

	So it is
18 JA	Y22 M
ALLAHAS	14 7:44 SEEF. 44
	Mar AH 7:44 SEEFLONIOA

Articles of

(Name of Corporation as P-17000033450	currently filed with the Flor	rida Dept. <u>of State</u>	) SEFE
		`	
	Number of Corporation (if k		
Pursuant to the provisions of section 607, neorporation:	1006, Florida Statutes, this $\alpha$	orporation adopts t	he following amendment(s)
A. If amending name, enter the new na	me of the corporation:		
			7
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associat	ation "Corp, $$ inc, or $$ $$	o . zi projessiona	"incorporated" or the abb l corporation name must co
B. Enter new principal office address, i	f applicable:		
(Principal office address MUST BE A ST	TREET ADDRESS )		
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> )	<u>cable:</u> OFFICE BOX)	SAME ABOVE	
D. If amending the registered agent an new registered agent and/or the new	d/or registered office address: v registered office address: MARIA DOLORES GOM		r the name of the
Name of New Registered Agent			<del></del>
	3060 NE 4TH AVE .		
		reet address)	_, Florida
	WILTON MANORS FL		. Florida
New Registered Office Address:	(City)		(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 àdditional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

 $P = President; \ F = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman \ or \ Clerk; \ CEO = Chief$ 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.

Mike Jones, v as Kemove Example:	, ana sai	to main, 35 to an inter-	
X_Change	<u>1'T</u>	John Doc	
X Remove	$\underline{V}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address 3060 NE 4 AVE
	VP	MARIA DOLORES GOMEZ  MORALES	
1) Change			WILTON MANORS,FL 33334-2048
Add			
Remove			
2) Change			
Add			
Remove .			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Articl Attach additional sheets, if necessary).	(Be specific)
	·
and the state of t	ange, reclassification, or cancellation of issued shares.
rovisions for implementing the amend	dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

. . . .

## DECEMBER 8TH ,2017

The date of each amendment(s) ad	ontion:	, if other than th
date this document was signed. DEC	EMBER 8TH ,2017	
Effective date <u>if applicable</u> :		
<del></del>	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes east for the amendment(s) fficient for approval.	
☐ The amendment(s) was/were appromust 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):	
	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were adoption was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
DECEMB	ER 8TH, ,2017	
Dated	4105/100	
selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	<del>.</del>
	CESAR MAYORGA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	