P17000038083

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OCT 292013

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: CIBO PROPERTI	ES CORP.		
	BER:			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.		
Please return all corres	pondence concerning this ma	itter to the following:		
	RICARDO RESINO			
	·	Name of Contact Perso	n	
		Firm/ Company		
	8004 NW 154 Street #117			
		Address		
	Miami Lakes, FL 33016			
	•	City/ State and Zip Cod	le	
RICU	SAR@GMAIL.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
RICARDO RESINO		305 at (300-0597	
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:	
\$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status	
Mailing Address			Address	
	ndment Section		Iment Section	
	sion of Corporations Box 6327	Division of Corporations Clifton Building		
	hassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

	Articles of Incorporation
CIBO PROPERTIES CORP.	FILED
(Name of Corporat	ion as currently filed with the Florida Dept. of State)
P1700003S083	2019 OCT (1 ₽ 5: \$6
(Docu	ment Number of Corporation (if known),
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	la Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the c	orporation:
	The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	rd "corporation," "company," or "incorporated" or the abbreviation o," "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicabl (Principal office address MUST BE A STREET AD)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>
D. If amending the registered agent and/or registence new registered agent and/or the new registered	red office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
	·
New Registered Office Address:	(City) , Florida (Zip Code)
	(Ciry) (Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and accept the obligations of the position.
,	A Assume a section of the bostonia
Sign	ature 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:					
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		
!) Change	Đ	FELIX GERMAN ORTEGA	8004 NW 154 Street #117		
XAdd			Miami Lakes, FL 33016		
Remove					
2) Change	D	RICARDO RESINO	8004 NW 154 Street #117		
X Add			Miami Lakes, FL 33016		
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

(Attach additional shee	g additional Articles, enter ts, if necessary). (Be spec	ific)		
				_ .
				· ····································
·				
·		- 		
*				
				
				
If an amendment prov	rides for an exchange, recl	assification, or can	icellation of issued s	hares,
provisions for impler (if not applicable,	menting the amendment if indicate N/A)	not contained in th	ie amendment itself:	<u>.</u>
7,	,			
	·	· ·		
				

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 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 sharehold action was not required.	er
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature	
(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 cou	rt
appointed fiduciary by that fiduciary)	
Price of the President of the Marian Company	
(Typed or printed name of person signing)	
(Title of person signing)	
(Title of person signing)	