Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000267745 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number: I20000000146

Phone

: (305)444-4994

Fax Number

: (305)444-4977

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN PUERTAPUERTA INC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

4

FILED

17 OCT 11 AM 9: 21

Articles of Amendment SPORFIARY OF STATES
Articles of Incorporation ALLAHASSET FEDRICA
of

PUERTAPUERTA INC			
(Name of Corporat	tion as currently filed with the Fl	orida Dept. of State)	
P17000076062			
(Docu	ment Number of Corporation (if kr	nown)	
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	da Statutes, this Florida Profit Cor	poration adopts the following amen	dment(s)
A. If amending name, enter the new name of the c	orporation:		
		The	
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	p," "Inc," or "Co". A profession	or "incorporated" or the abbrevia nal corporation name must contain	tion the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)			_
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BC</u>	<u></u>		— —
D. If amending the registered agent and/or registered new registered agent and/or the new registered	ered office address in Florida, en l office address:	ter the name of the	_
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:	(- :-::=================================	. Florida	
New Registered Office Address.	(City)	, Florida (Zm Code)	_
New Registered Agent's Signature, if changing Res hereby accept the appointment as registered agent.		obligations of the position.	
- Sim	motion of New Parietrial Leave of	'ahanana	

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>	<u>Name</u>	<u>Addres</u> s
l) Change	VP	SEBASTIAN MARTORELL	1300 NW 84TH AVE
XX Add			DORAL, FL 33126
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
ه) Change		_	
Add			
Remove			

	(Be specific)
	
.	
If an amendment provides for an each	ange, reclassification, or cancellation of Issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

The date of each smeadm	10/10/2017	
date this document was sign	oed, suoption:	, if other than t
Effective date if applicati		
	(no more than 90 days after constiderent file date)	
Nata: If the date linested document's effective date of	in this block does not meet the applicable statutory filing requirements, this date will on the Department of Sizze's records.	not be listed as t
Adoption of Amendment	(CHECK ONE)	
The extendrough(s) was/ by the shereholders was	were adopted by the shareholders. The number of votes cast for the amendment(s)	
The assendment(s) wash must be separately prov	were approved by the shareholders through voting groups. The following examined debt for each voting group entitled to rose expansively on the amundments;:	
"The minder of vo	ses cast for the unenducuu(s) was/were sufficient for approval	
by		·
	(notice Engine)	
=ccour was 804 tedns.ect	were adopted by the board of directors without charefulder action and shareholder	
sotion was not required.	The second secon	
Dested	(By a Green, project restlement - V durates a reflect to	
Signature	72.30	
	(By a director, president opposite of them - If directors or officers have not been selected, by an isompositor - if in the hinds of a receiver, institut, or other court appointed fiduciary by that fiduciary)	-
	FORGE GUSTAVO FRIEDRICHS	
	(Typed or printed name of person signing)	· · ·
	P	
	(Title of person signing)	