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SECNCIARY OF STATE ALLEANASSEE, FLORIDA

JUN 21 7011 CALBASASAS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ion:orinokia pr	O 3000, C.A. CORP			
DOCUMENT NUMBER:	P18000080879				
The enclosed Articles of A	mendment and fee are su	bmitted for filing.			
Please return all correspond	dence concerning this ma	tter to the following:			
	COSTANTI	NO XINTAVELONIS CU	ERVO		
		Name of Contact Perso	n		
	ORINOKIA PRO 3000, C.A. CORP				
		Firm/ Company			
	7911 NW 72 AVENUE 215				
	Address				
	MIAMI FLORIDA 33132				
		City/ State and Zip Cod	c		
	COSTANTIN	OXINTAVELONIS@GM	AIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)		
For futher information cor					
	DXINTAVELONIS CUE	RVO at (719-9019) ode & Daytime Telephone Number		
Name of Co	ontact Person	Area Co	ode & Daytime Telephone Number		
Enclosed is a check for the	following amount made	payable to the Florida Dep	artment of State:		
S35 Filing Fee	□\$45.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□852.50 Filing Fee Cortificate 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			

Tallabassee, FL 32301

Articles of Amendment to Articles of Incorporation

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ORINOKIA PRO 3000, C	.A. CORP			
	filed with the Florida Dept. of State)			
P180000808				
(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this F is Articles of Incorporation:	<i>lorida Profit Corporation</i> adopts the fe	ollowing a	ımendı	ment(s)
A. If amending name, enter the new name of the corporation:				
		7	he n	(214)
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 "I	o". A professional corporation name	the abb	reviati	ion
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)				-
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	1444 BISCAYNE BLVD SUITE 20	8 2 6418	19	-
	MIAMI FLORIDA 33132	\$555 \$555 \$555 \$555 \$555 \$555 \$555 \$55	JUN - 5	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:		ORGONALS SIVIE	PH 5: 28	ית: ס
Name of New Registered Agent	יָּ	<u>-></u> -	_	
(Florida stre	et address)			
New Registered Office Address:	, Florida			_
1	City)	(Zip Co	de)	
New Registered Agent's Signature, if changing Registered Agent:				
Thereby accept the appointment as registered agent—I am familiar w	ith and accept the obligations of the po	sition.		
Signature of New Re	egistered 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: \underline{X} Change	<u>b.l.</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	CHRISTIAN E CUARTAS HERNA	NOEZ 5641 SOUTH KENNETH AVE
X Add			CHICAGO.IL 60629
Remove			1-11-
2) Change			
Add			SE SE TI
Remove			55.5
3) Change			
Add			
Remove			> Table 2
4) Change			
Add			
Remove			
5) Change			
Add			- this Philips
Remove			
6) Change			
Add			·
Remove			

Attach additional sheets, if necessary).	(Be specifie)	
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		70 A
I an amendment provides for an each	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	원 ^국 아
(if not applicable, indicate N/A)	noment it not contained in the amentment usen:	
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		ルン
		10A
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The date of each amendment(s) ac date this document was signed.	loption:	,		, if other than ti
Effective date if applicable:				
	(no more th	ian 90 days after amendn	ient file dater	
Note: If the date inserted in this b document's effective date on the De			requirements, this	date will not be listed as t
Adoption of Amendment(s)	(CHECK ONE)			
■ The amendment(s) was/were ado by the shareholders was/were su		. The number of votes cas	st for the amendmen	u(s)
☐ The amendment(s) was/were app must be separately provided for				nent
"The number of votes cast	for the amendment(s) was	s/were sufficient for appro	oval	
by			 .	
	(voting group)			
☐ The amendment(s) was/were ado action was not required.	pted by the board of dire	ctors without shareholder	action and sharehol	der
☐ The amendment(s) was/were add action was not required.	pted by the incorporators	s without shareholder action	on and shareholder	
04/27/01 Dated	9			
Signature	Contaction	Intardon	is and	19 17 17 18 19
selecte		r officer – if directors or of in the hands of a receiver ciary)		
	COSTANTING	O XINTAVELONS CUE	RVO	
	(Typed or pri	nted name of person signi	ing)	25 2 D
	PR	ESIDENT	2 ⁺	
	(*)	l'itle of person signing)		