

Florida Department of State
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.

((H11000264226 3)))



H110002642263ABCV

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 : DORAL CORPORATE FILING SERVICE
Account Number : I20070000081
Phone : (305) 436-0979
Fax Number : (305) 592-5575

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 NOV -4 AM 10: 47

****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
L.P. BUSSIERE, CORP.**

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

Amend
11/7/11

RECEIVED

11 NOV -4 AM 10: 50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H11000264226

Articles of Amendment
to
Articles of Incorporation
of

L.P. BUSSIERE, CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

P94000046849

(Document Number of Corporation (if known))

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 NOV -4 AM 10:47

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

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**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

(City)

Florida

(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

Page 1 of 4

H11000264226

E11000264226

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

<u>Title(s)</u>	<u>Name</u>	<u>Address</u>
1) <u>P</u>	<u>BUSSIERE, EDWARD</u>	<u>1375 NW 97TH AVE UNIT 11</u> <u>DORAL FL 33172</u>
2) <u>S</u>	<u>VASQUEZ, YRANA</u>	<u>6105 NW 115 CT</u> <u>DORAL FL 33178</u>
3) <u>I</u>	<u>BUSSIERE, LIDIA</u>	<u>14974 SW 18 TERR</u> <u>MIAMI, FL 33185</u>
4) _____	_____	_____
5) _____	_____	_____
6) _____	_____	_____

If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

<u>Title(s)</u>	<u>Name</u>	<u>Title(s)</u>	<u>Name</u>
1) _____	_____	4) _____	_____
2) _____	_____	5) _____	_____
3) _____	_____	6) _____	_____

E11000264226

E. If amending or adding additional Articles, enter change(s) here

(attach additional sheets, if necessary). (Be specific)

H 1 1 0 0 0 2 6 4 2 2 6

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself;
(if not applicable, indicate N/A)

Page 3 of 4

H 1 1 0 0 0 2 6 4 2 2 6

H11000264226

The date of each amendment(s) adoption: 11/4/2011

(date of adoption - required)

Effective date if applicable: _____

(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)

- ☐ 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 11/4/2011

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 court appointed fiduciary by that fiduciary)

Edward Bussiere

(Typed or printed name of person signing)

President

(Title of person signing)

Page 4 of 4

H11000264226