Florida Department of State

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Account Name : BEATRIZ M. CAPOTE, P.A.

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: (305)374-1555

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

COR AMND/RESTATE/CORRECT OR O/D RESIGN C & O INVESTMENTS, INC.

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Articles of Amendment to Articles of Incorporation of

C & O INVE	STMENTS, INC.				
(Name of Corporation as curren	tly filed with the Florida	Dept. of State)		,	
P970	00012652				•
(Document Numb	er of Corporation (if know	m)			
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this Flo	orida Profit Corporatio	on adopts	the fol	lowing
A. If amending name, enter the new name of t	he corporation:				
				he new	
name must be distinguishable and contain the abbreviution "Corp.," "Inc.," or Co.," or the a name must contain the word "chartered," "profe B. Enter new principal office address, if appliation of the appliance of the contains of the contains the word "chartered," "profession of the contains of the co	lesignation "Corp," "Inc, ssional association," or t cable:	" or "Co". A profess	ional corp		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFIC</u>) D. If amending the registered agent and/or res		Florida, cuter the nan	STURE MRY OF SO	M OCT 26 PH W	
new registered agent and/or the new registe		TION GOT LINES INC MAL		25	
Name of New Registered Agent:			(> :\m ('±4		
New Registered Office Address:	(Florida street ad	dress)			٠
<u> </u>		, Florida_			
	(City)	(Zip Code)			
New Registered Agent's Signature, if changing Thereby accept the appointment as registered age		d accept the obligation:	s of the pos	ition.	
Sign	nature of New Registered	gent, if changing			

- "H11000257117:3: ...

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)

Title	<u>Name</u>	Address	Type of Action
SNP	EDY ORTEGA	9221 S.W. 66 STREET MIAMI, FLORIDA 33173	□ Add □ Remove
P/S	CARLOS M. CAPOTE	109 East Rivo Alto Drive Miami Beach, Florida 33139	
	<u>.</u>		
E. If amend (attach ad	ding or adding additional Articles, end dditional sheets, if necessary). (Be si	nter change(s) here: pecific)	
provisie	nendment provides for an exchange, ons for implementing the amendmen of applicable, indicate N/A)	reclassification, or cancellation of i t if not contained in the amendmen	ssued shares, t itself:
			,

1	a/	26/	201:	1 1	ე.	37
L	01	Z0/	AUL.	L ⊥	J.	31

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CAPOTE & CAPOTE, PA

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The date of each amen	
Effective date <u>if applic</u>	(date of adoption tyreglitred) sble: (no more than 90 days after amendment file date)
Adoption of Amendme	nt(s) (CHECK ONE)
	vas/were adopted by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
	vas/were approved by the shareholders through voting groups. The following statement rovided 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	99
	(voting group)
The amendment(s) was not require	ras/were adopted by the board of directors without shareholder action and shareholder red.
The amendment(s) was not require	vas/were adopted by the incorporators without shareholder action and shareholder red.
Dated	October 26, 2011
Signat	
	(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)
	CARLOS M. CAPOTE
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)