

7/15/2014

Division of Corporations

P99000094603  
Florida Department of State

Division of Corporations

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(((H14000168579 3)))



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**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
DON PAN UNITY, INC.**

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

C. LEWIS  
JUL 16 2014  
EXAMINER

(((H14000168579 3)))

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: DON PAN UNITY, INC

DOCUMENT NUMBER: P99000094603

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CARMEN C ROJAS

Name of Contact Person

DON PAN UNITY, INC

Firm/ Company

400 S. DIXIE HWY

Address

CORAL GABLES, FL 33146

City/ State and Zip Code

marilumeneses@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARMEN C. ROJAS

Name of Contact Person

at ( 305 ) 305-5188

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate 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  
Tallahassee, FL 32301

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DIVISION OF CORPORATIONS

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Articles of Amendment  
to  
Articles of Incorporation  
of

**DON PAN UNITY, INC**

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

**P99000094603**

(Document Number of Corporation (if known))

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:**

N/A

*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)**

**400 S DIXIE HWY  
CORAL GABLES, FL 33146**

**C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)**

**400 S DIXIE HWY  
CORAL GABLES, FL 33146**

**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 **CARMEN C ROJAS**

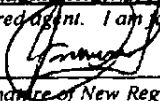
**400 S DIXIE HWY**

(Florida street address)

New Registered Office Address: **CORAL GABLES**, Florida **33146**  
(City) (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

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**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                      PT      John Doe

X Remove                     V       Mike Jones

X Add                         SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>PT</u>	<u>MARIA T RUJANA</u>	<u>590 NW 27TH AVE</u>
<input type="checkbox"/> Add			<u>MIAMI, FL 33125</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>VP</u>	<u>EMILIA RUJANA</u>	<u>590 NW 27TH AVE</u>
<input type="checkbox"/> Add			<u>MIAMI, FL 33125</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>DIRECTOR</u>	<u>CARMEN C ROJAS</u>	<u>400 S DIXIE HWY</u>
<input checked="" type="checkbox"/> Add			<u>CORAL GABLES, FL33146</u>
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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**E. If amending or adding additional Articles, enter change(s) here:**  
*(Attach additional sheets, if necessary). (Be specific)*

N/A

**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)*

N/A

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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: 07/15/2014  
(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 07/15/2014

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)

**CARMEN C ROJAS**

(Typed or printed name of person signing)

**DIRECTOR**

(Title of person signing)