(Requestor's Name)	
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(City/State/Zip/Phone #)	
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(Document Number)	
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Amend TBrown 9-15-11

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

	**	•	•
NAME OF COR	PORATION: M.I.M	LATIN AMERICAN I	TINK INC
DOCUMENT NU	MBER: <u>V4533</u>	4	
The enclosed Artic	eles of Amendment and fee are	submitted for filing.	
Please return all co	rrespondence concerning this	matter to the following:	
		TOARTI	
		ISABEL	
	Nan	ne of Contact Person	
	11. 8 T	TAX INV. CORF	>
	M A -	Firm/ Company	<del></del>
		. ,	
	7758 NU	N 44TH ST	
		Address	
	·	-	
		, FI 33351	<u> </u>
	-	/ State and Zip Code	
	ISISTAX@	201.00M	
	E-mail address: (to be used to	or future annual report notification)	
For further informa	ation concerning this matter, pl		
ISIS	, ISABE	_at ( <u>954</u> ) 600 -	
Name	of Contact Person	Area Code & Daytime Telep	bhone Number
Enclosed is a chec	k for the following amount ma	de payable to the Florida Departn	nent of State:
[] \$35 Filing Fee	\$43.75 Filing Fee &	☐\$43.75 Filing Fee &	□ \$52.50 Filing Fee
்.	Certificate of Status	Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy
		(Additional copy is enclosed)	(Additional Copy is enclosed)
Mailing A	ldress	Street Address	
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
	e, FL 32314	2661 Executive Center Circle	
		Tallahassee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

SCORE 14 AM 10 34

MI.M. LATIN AMERICAN LINK, INC.

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

V45334

(Document Number of Corporation (if known)

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

breviation "Corp.," "Inc.," or Co.," o me must contain the word "chartered,"	"professional association," or the	abbreviation "P.A."
Enter new principal office address, if	applicable:	
rincipal office address <u>MUST BE A ST</u>		
		<del>_</del>
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**Enter new mailing address, if applic	abla	
Mailing address MAY BE A POST O		
Minimum dual Cos Milita Distra Cost C.	1 ICE DOM	
If amending the registered agent and	or registered office address in Fl	orida, enter the name of the
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If amending the registered agent and	or registered office address in Fl	orida, enter the name of the
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If amending the registered agent and new registered agent and/or the new Name of New Registered Agent:	or registered office address in Flore address in Flore address:  (Florida street address)	ess) , Florida
If amending the registered agent and new registered agent and/or the new Name of New Registered Agent:	or registered office address in Floregistered office address:	ess)

## 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)

<u>itle</u>	<u>Name</u>	Address	Type of Action
JP_	LUCCA MALDONADO	17921 NW 86 AVE MIAMI, FL 33015	Add Remove
-	-		☐ Add ☐ Remove
			Add Remove
(attach additi	or adding additional Articles, enter continued in the specific of the specific	c)	
UP	Luces Mald	lonndo 179- Mis	21 NW 86 Aug n FL 3304
provisions 1	dment provides for an exchange, recla for implementing the amendment if no pplicable, indicate N/A)		
provisions 1	for implementing the amendment if no	ssification, or cancellation of iss	sued shares,

The date of each amendment(s) a	doption: <u>9-01-2011</u>
Effective date <u>if applicable</u> :	(date of adoption is required)
(no	more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement 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	
(vot	ing group)
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder
Dated	9-10-201
Signature 7	Jana Agum
(By a di	rector, president or other-officer – if directors or officers have not been
	by an incorporator – if in the hands of a receiver, trustee, or other court diduciary by that fiduciary)
11	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	Prosident
	(Title of person signing)