

P02000044773

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

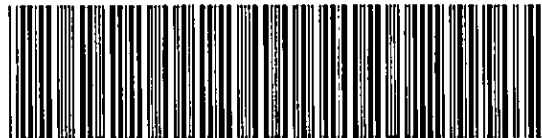
(Document Number)

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2018 NOV 26 PM 12: 29  
SECRETARY OF STATE  
TALLAHASSEE, FL

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NOV 27 2018

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: S.A.B. Contracting Services, Inc.

DOCUMENT NUMBER: P02000044773

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

Please return all correspondence concerning this matter to the following:

Juan Carlos Buade  
Name of Contact Person  
S.A.B. Contracting Services, Inc.  
Firm/ Company  
16225 SW 117th Avenue # 25  
Address  
Miami, Florida 33177  
City/ State and Zip Code  
sabcontractingservices@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juan Carlos Buade at ( 305 ) 970-0855  
Name of Contact Person 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 9, 2018

JUAN CARLOS BUADE  
16225 SW 117TH AVENUE #25  
MIAM, FL 33177

SUBJECT: S.A.B. CONTRACTING SERVICES, INC.  
Ref. Number: P02000044773

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You must check the type of action for each officer listed.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden  
Regulatory Specialist II

Letter Number: 618A00023197

RECEIVED  
2018 NOV 26 PM 1:26  
SEC  
T  
DIVISION OF STATE  
CORPORATIONS

Articles of Amendment  
to  
Articles of Incorporation  
of

**FILED**

S.A.B. Contracting Services, Inc.

2018 NOV 26 PM 12:29

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

P02000044773

SECRETARY OF STATE  
TALLAHASSEE, FL

(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:**

\_\_\_\_\_ *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* \_\_\_\_\_ Doris Fernandez  
\_\_\_\_\_ 16225 SW 117th Avenue #25  
\_\_\_\_\_ *(Florida street address)*  
*New Registered Office Address:* \_\_\_\_\_ Miami, Florida 33177  
\_\_\_\_\_ *(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*

**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

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>    </u> Change <u>    </u> Add <u>X</u> Remove	<u>P</u>	<u>Maria C Buade</u>	<u>22912 SW 115 CT</u> <u>Miami, Florida 33170</u>
2) <u>X</u> Change <u>    </u> Add <u>    </u> Remove	<u>P</u>	<u>Juan Carlos Buade</u>	<u>16225 SW 117 Avenue #25</u> <u>Miami, Florida 33177</u>
3) <u>    </u> Change <u>X</u> Add <u>    </u> Remove	<u>V</u>	<u>Juan Carlos Buade</u>	<u>16225 SW 117 Avenue #25</u> <u>Miami, Florida 33177</u>
4) <u>    </u> Change <u>X</u> Add <u>    </u> Remove	<u>S</u>	<u>Doris Fernandez</u>	<u>16225 SW 117 Avenue #25</u> <u>Miami, Florida 33177</u>
5) <u>    </u> Change <u>    </u> Add <u>    </u> Remove			
6) <u>    </u> Change <u>    </u> Add <u>    </u> Remove			



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

October 30, 2018

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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):

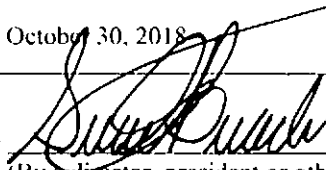
"The number of votes cast for the amendment(s) was/were sufficient for approval

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 October 30, 2018 \_\_\_\_\_

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)

Juan Carlos Buade

\_\_\_\_\_  
(Typed or printed name of person signing)

VP

\_\_\_\_\_  
(Title of person signing)