

P02000079760

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☐ PICK-UP

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(Business Entity Name)

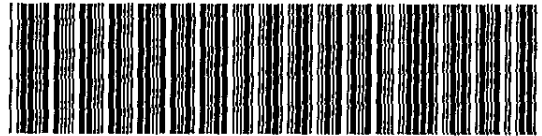
(Document Number)

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Amend/Name
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02/08/06--01049--024 **35.00

FILED
06 FEB -8 AM 10:00
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MIREYA'S CABINET DESIGNER INC

DOCUMENT NUMBER: P02000079760

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

Please return all correspondence concerning this matter to the following:

RAMON R SEVERINO

(Name of Contact Person)

MIREYA'S CABINET DESIGNER INC

(Firm/ Company)

3655 W 16TH AVE STE 9

(Address)

HIALEAH, FL 33012

(City/ State and Zip Code)

For further information concerning this matter, please call:

MANUEL MUNOZ

(Name of Contact Person)

at (305) 300-6837

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

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

☐ \$52.50 Filing Fee
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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

Articles of Amendment
to
Articles of Incorporation
of

FILED
06 FEB -8 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MIREYA'S CABINET DESIGNER INC .

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

P02000079760

(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:

NEW CORPORATE NAME (if changing):

PURA CABINETS INC

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

ARTICLE IV: REGISTERED AGENT. ROSA M GONZALEZ, OF 8861 NW 153RD
MIAMI LAKES, FL 33018, RESIGNS AS REGISTERED AGENT. RAMON
R. SEVERINO, OF 3655 W 16TH AVE, BAY 7 & 8, HIALEAH, FL 33012
IS NAMED NEW REGISTERED AGENT.

ARTICLE VI: DIRECTOR'S. ROSA M. GONZALEZ RESIGNS AS PRESIDENT.
RAMON R. SEVERINO IS NAMED PRESIDENT.

(Attach additional pages if necessary)

If an amendment provides for 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)

RAMON R. SEVERINO 100% OF SHARES

(continued)

The date of each amendment(s) adoption: JANUARY 23, 2006

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

Adoption of Amendment(s) **(CHECK ONE)**

☒ The amendment(s) was/were approved 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):*

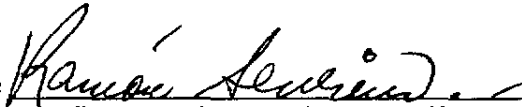
"The number of votes cast for the amendment(s) was/were sufficient for approval by

(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.

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)

RAMON R SEVERINO

(Typed or printed name of person signing)

VP

(Title of person signing)

FILING FEE: \$35

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

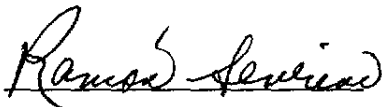
Pursuant to the provisions Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation:

MIREYA'S CABINET DESIGNER CORP

2. The name and address of the registered agent and office is:

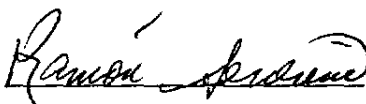
RAMON R SEVERINO
3655 W 16TH AVE, STE 7 & 8
HIALEAH, FL 33012

SIGNATURE 

TITLE PRESIDENT

DATE JANUARY 23, 2006

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT. OR IF THIS DOCUMENT IS BEING FILED MERELY TO REFLECT A CHANGE IN THE REGISTERED OFFICE ADDRESS, I HEREBY CONFIRM THAT THE CORPORATION HAS BEEN NOTIFIED IN WRITING OF THIS CHANGE.

SIGNATURE 

DATE JANUARY 23, 2006