Division of Corporations Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000085125 3)))



HC100000851253ABCY

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

,			,,		,	
					~~~	
€_	To:				:	
-7		Division of Con	·		ر ب	
ί		Fax Number	: (850)617-6380		, 'S	
1	From:			ia. Lar Lara	PH	i i i
,		Account Name	: PADRON AND ASSOCIATES INC.	(non		( )
		Account Number	: I20060000156	卫环		
		Phone	: (305)818-0404	, הין י	$\sim$	
,		Fax Number	: (305)818-0898			

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

Email	Address:			

## COR AMND/RESTATE/CORRECT OR O/D RESIGN O.C.H. QUALITY KITCHEN INC.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

har all

TO: Amendment Section

## COVER LETTER

7 G T T TOTAL COUNTY	••		
Division of Corpor	ations		

NAME OF CORPORATION: O.C.H. QUALITY KITCHEN INC. DOCUMENT NUMBER: P04000119394

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

Please return all correspondence concerning this matter to the following:

RALPH PADRON Name of Contact Person PADRON & ASSOCIATES, INC. Firm/Company 2095 W 76TH STREET Address HIALEAH, FL 33016

City/ State and Zip Code

## RALPH@RALPHPADRON.COM

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

For further information concerning this matter, please call:

at (305) 818-0404

Area Code & Daytime Telephone Number RALPH PADRON Name of Contact Person

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 Tallahassec, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

O.C.H. QUALITY KITCHEN INC.	
(Name of Corporation as currently filed with the	Florida Dept. of State)
P04000119394	
(Document Number of Corporation	(ii knowi)
Pursuant to the provisions of section 607,1006, Florida Statutes, this tits Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
O.C.H. CABINET DESIGN INC.	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS')	
C. Enter new mailing address, it applicable: (Mailing address MAY BE A POST OFFICE BOX)	
Change and the ATOST OFFICE DOS	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	dress in Florida, enter the name of the
Name of New Registered Agent	
(Clorida si	rege address)
New Registered Office Address:	, Florida
IChy	
New Registered Agent's Signature, if changing Registered Agent Thereby accept the appointment as registered agent. I am jamikar	
/	
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:

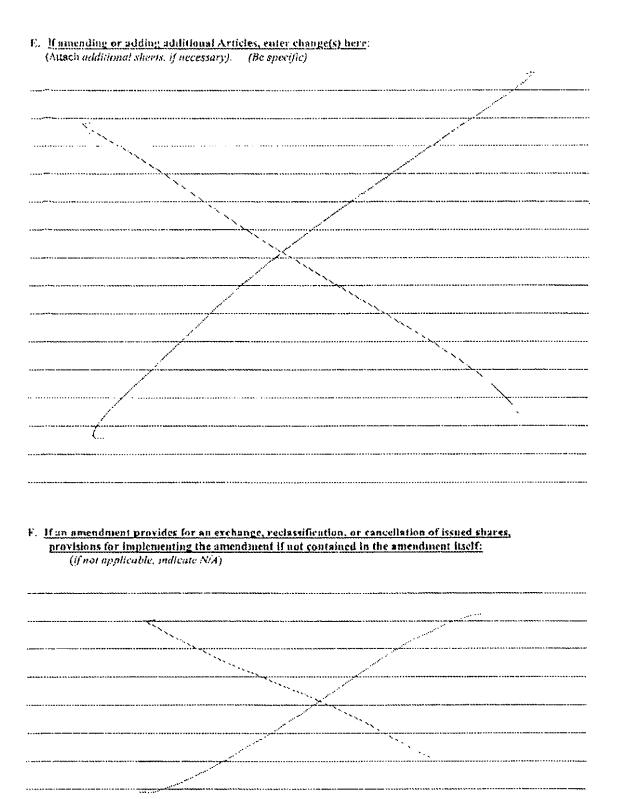
(Attach additional shorts, if necessary)

Please note the officer/director title by the first letter of the office tide:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TK= Trustee; C = Choirman 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 FST 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	<u>y</u>	Mike Jones		
<u>X</u> Add	<u>sy</u>	Sally Smith		
Type of Action (Check One)	Title	Name	Address	
1) Change	************	MA		
Add				
Remove	٧.,			
2) Change				
Add				
Remove				
3) Change	*****			
Add				
Remove				
4) Change				
□ Add			(110 m m m (110 m m m (110 m m m m m m m m m m m m m m m m m m	
Remove				
5) Change				
Add	and the second			
Remove	p <sup>r</sup>			
6) Change	,, b			
Add				
Remove				
		Page 2 of 4		



	leption:	, if other than th
date this document was signed.		
Effective date if applicable:		-ganganan
	(no more than 30 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pied by the shareholders. The number of votes cast for the amendment(s) fucient for approval.	
	raved by the shareholders through voting groups. The following statement cach 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)	
	(sciling group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pied by the incorporators without shareholder action and shareholder	
Dated	<u> </u>	
(By a th selected	rector, president or other officer — if directors or officers have not been l, by an incorporator — if in the hands of a receiver, trustee, or other court edifiduciary by that fiduciary)	•
	OSNIEL A. CUE	
	(Typed or printed name of person signing)	••••
	PRESIDENT	
	(Title of person signing)	