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HASSEE, FLORID

ALASSEE, FLORIDA

AUG 12 2015

R. WHITE

COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CODDOD	ATION: <u>JCD</u> RE	MODELLIG	COMPANY	
	cr: <u>PO90000</u>	~	CONT. 100	
	Amendment and fee are su	-		
Please return all corresp	ondence concerning this ma	tter to the following:		
_	Juan	n Donad of Name of Contact Person	D	
_		WDELING CE		
_	Firm/ Company 15477 5W 18 LN Address			
	MIA	AMI, FL, City/ State and Zip Cod	33185	
		elden E not n sed for future annual report		
For further information of	concerning this matter, pleas	se call:		
Juan Name of	Porado Contact Person		de & Daytime Telephone Number	
	he following amount made j		·	
\$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)	
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 assee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment

to

_	Artic	cles of Incor	poration	1	r ·
ICD Pen	rdeli	<u> </u>	Company	15 AUG	AM 9: 23
(Name o	f Corporation as	s currently	filed with the Florida D		
			201	W. T. WILLY JOF	E, FEORIGA
	(Document)	Number of C	Corporation (if known)		
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Stat	tutes, this <i>Fl</i>	orida Profit Corporatio	n adopts the foll	owing amendment(s)
. If amending name, enter the new na	ıme of the corpo	ration:			
NIA	k				The new
ame must be distinguishable and cont Corp.," "Inc.," or Co.," or the design word "chartered," "professional associal. Enter new principal office address, Principal office address MUST BE A ST	ation "Corp," "I tion," or the abbr <u>if applicable:</u>	Inc," or "Co reviation "P.	". A professional corp	orporated" or to	he abbreviation rust contain the
Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> (NIA		
D. If amending the registered agent an new registered agent and/or the new			s in Florida, enter the	name of the	
Name of New Registered Agent	Juan	<u> </u>	Dorado		
		(Florida stree	t address)		
New Registered Office Address:				, Florida	
		(C	lity)	•	(Zip Code)
New Registered Agent's Signature, if cl hereby accept the appointment as regist			h and accept the obligat	tions of the posit	ion.
	Sig b ature	e of New Res	gistered Agent, if changi	ng	

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.

X Change	<u>PT</u> <u>John</u>	<u>Doc</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change		Juan F. Dorado	15477 SW 18 LN
Add			MIAMI, FL 33185
Remove			
2) Change	P	Juan C. Donado	15477 SW 18 LN
X _ Add		•	MIAMI, FL 33185
Remove			
3) Change		Juan D. Donado	15477 SW 18 LN
X _ Add			MIAMI, FL, 33185
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

D.

tach additional sheets, if necessary	Articles, enter chang y). (Be specific)	<u>-1-1</u> .		
X 1 1 10				
NIA				
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an amendment provides for an e rovisions for implementing the a	mendment if not co			1
)			
(if not applicable, indicate N/A				
(if not applicable, indicate N/A				

The date of each amendment(s) adoption: date this document was signed.	, if other than the
(no more than 90 days	after amendment file date)
Note: If the date inserted in this block does not meet the applicable st document's effective date on the Department of State's records.	atutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	er of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through vomust be separately provided for each voting group entitled to vote se	
"The number of votes cast for the amendment(s) was/were suffic	cient for approval
by(voting group)	п
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors withou action was not required.	at shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without sha action was not required.	reholder action and shareholder
Dated 08 5 2015	
Signature	
(By a director, president or other officer – if	directors or officers have not been
selected, by an incorporator - if in the hands	
appointed fiduciary by that fiduciary)	
Juan C.	Dorado
(Typed or printed name o	I person signing)
PR.	SSIDENT
(Title of person	on signing)