(Re	questor's Name)	
(Ad	ldress)	
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(0)	700 - 777 750	- 40
(CII	y/State/Zip/Phone	9 #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

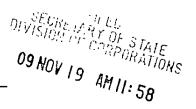
Tallahassee, FL 32314

NAME OF CORPORATION: _	ALL GROUP DESING CORP
DOCUMENT NUMBER:	P09000065006
The enclosed Articles of Amenda	at and fee are submitted for filing.
Please return all correspondence of	ocerning this matter to the following:
	MARIA MERCEDES PACHECO
	Name of Contact Person
	SE TAXES AND CREDIT SOLUTIONS
	Firm/ Company
	10726 NW 58 ST
	Address
	MIAMI FL 33178
	Gity//State and Zip Code
E-mail ad	ss: (to be used for future annual report notification)
For further information concerning	his matter, please call:
	at ()
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the follow	g amount made payable to the Florida Department of State:
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



ALL GROUP DESING CORP

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

P09000065006

(Document Number of Corporation (if known)

the provisions of section 607 1006. Florida Statutes, this Florida Profit Corporation adopts the following

name must be distinguishable and contain the word "corporation," "company," or "in abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A prof name must contain the word "chartered," "professional association," or the abbreviation "P. 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)	ofessional corporati
(Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable:	
C. Enter new mailing address, if applicable:	
(Muning address: MATSDEA FOST OFFICE BOX)	
ري به در از در از در از	
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D. If amending the registered agent and/or registered office address in Florida, enter the	ie name of the
new registered agent and/or the new registered office address:	Tames of the
Name of New Registered Agent: N/A	
New Registered Office Address: (Florida street address)	
Flac	
	ملائم
(City) (Zip Code,	lorida

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>Title</u>	<u>Name</u>	Address	Type of Action
PDS	SAUL ESCALANTE	2724 W 84ST HIALEAH FL 33016	
PDS	JACKELINE ESCALANTE	2724 W 84 ST HIALEAH FL 33016	☑ Add ☐ Remove
	ding or adding additional Articles, enterditional sheets, if necessary). (Be spe		
•			
~			
provis	mendment provides for an exchange, r ions for implementing the amendment not applicable, indicate N/A)		
N/A			
	· ·· · · · · · · · · · · · · · · · · ·		

The date of each amendment	t(s) adoption: 11/14/2009
Effective date <u>if applicable</u> :	(date of adoption is required)
Effective date <u>if applicable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated 11/1	0/2009 and Escalar
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	SAUL ESCALANTE
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)