# P10000063903

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SECRETARY OF STATE

Amend & MC Brown 11-7-11

### **COVER LETTER**

TQ: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations NAME OF CORPORATION: JOSEPH All IN SERVICE INC. DOCUMENT NUMBER: \$\frac{7000063903}{} The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ribaine P. Joseph Name of Contact Person JOSEPH All IN SERVICE INC. 2817 BEICO DR. UNIT 8 ORIANDO, FL. 32808 AND HENTENDRISE @ 9MAIL. COM
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DEHNGE TO HILL at (407) 591-2934

Area Code & Davtime 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 & ■ \$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building



# FLORIDA DEPARTMENT OF STATE Division of Corporations

October 25, 2011

RIBAINE P JOSEPH JOSEPH ALL IN SERVICES, INC 2817 BELCO DR UNIT 8 ORLANDO, FL 32808

SUBJECT: JOSEPH ALL IN SERVICES, INC

Ref. Number: P10000063903

We have received your document for JOSEPH ALL IN SERVICES, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6925.

Letter Number: 311A00024402

Teresa Brown Regulatory Specialist II

www.sunbiz.org

# Articles of Amendment to Articles of Incorporation

of				
JOSEPH All IN SERVICES	on (if known)  20/1 NOV  PHE: 15  15  15  15  15  15  15  15  15  15			
(Name of Corporation as currently filed with t	he Florida Dept. of State) 14/50			
P10000063903	AHASSES OF SE			
(Document Number of Corporati	on (if known)			
Pursuant to the provisions of section 607.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Profit Corporation</i> adopts the following			
A. If amending name, enter the new name of the corporation	<u>ı:</u>			
JANTH Following True H	and I FATERDOISE TUCTI			
name must be distinguishable and contain the word "corpe abbreviation "Corp.," "Inc.," or Co.," or the designation "Contain the word "chartered," "professional association and the word "chartered,"	orp," "Inc," or "Co". A professional corporation			
B. Enter new principal office address, if applicable:	2817 BElco Dr.			
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Unit 8			
	ORlando, FL. 32808			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  P. O Box 937				
	CLARCONA, FL. 32710			
	CIARCOUTT, 1 C. JETTO			
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:	<del></del>			
New Registered Office Address: (Florid	(Florida street address)			
	, Florida			
(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 1	Registered Agent, if changing			

	ional sheets, if necessary)	cer and/or Director being added:	
Title YP CO	DEANGELO HILL SAMUEL JOSEPH	Address 5225 Millenia Blue # 207 DRIANDO, FL. 32839 2337 MAKE DEBRAD #525 ORIANDO, FL. 32839	Type of Acti Add Remove Add Remove
			☐ Add ☐ Remove
(attach add	ing or adding additional Articles, enter ditional sheets, if necessary). (Be spec	cific)	· · ·
)NAtu	ine of Business: Re	ental of Banquet h	fall [Ad
F. If an am	endment provides for an exchange, re	eclassification, or cancellation of is	sued shares,
provision	endment provides for an exchange, rens for implementing the amendment in applicable, indicate N/A)		
provision	ns for implementing the amendment i		
provision	ns for implementing the amendment i		

If amending the Officers and/or Directors, enter the title and name of each officer/director being

The date of each amendment(s)	adoption:
Effective date if applicable:	10 - (date of adoption is required)
(no	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	oproved by the shareholders through voting groups. The following statemen reach 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	ting group)
(va	ting group)
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated/0_/	20/2011
selected	irector, president of other officer – if directors or officers have not been it, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
_	Ribaine Joseph
	(Typed or printed name of person signing)
	CEO
_	(Title of person signing)