

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H10000231505 3)))



H100002315053ABCR

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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

**\*\*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  
SPECIALTY LIGHTING & BULBS, INC.**

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$52.50

Electronic Filing Menu

Corporate Filing Menu

Help



October 22, 2010

FLORIDA DEPARTMENT OF STATE

Division of Corporations

SPECIALTY LIGHTING & BULBS, INC.

11580 W STATE ROAD 84

DAVIE, FL 33325

SUBJECT: SPECIALTY LIGHTING & BULBS, INC.

REF: P10000065236

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

CHECKING MORE THAN ONE BOX IS NOT ACCEPTABLE. ONLY ONE METHOD OF ADOPTION CAN BE CHOSEN.

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) 245-6906.

Darlene Connell  
Regulatory Specialist II

FAX Aud. #: H10000231505  
Letter Number: 910A00025083

RECEIVED  
10 OCT 27 AM 8:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

H10000231505

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Specialty Lighting & Bulbs, Inc.

DOCUMENT NUMBER: P10000065236

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

Please return all correspondence concerning this matter to the following:

Alan S. Rosenberg, Esq.  
Name of Contact Person

Koleos Rosenberg, P.A.  
Firm/Company

First Trust Bank Building  
Address

8211 W. Broward Blvd, Ste. PH4, Plantation, Fl. 33324  
City/State and Zip Code

Jessica@KoleosRosenberg.Com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alan Rosenberg / Jessica DeBlasio (954) 474-9929  
Name of Contact Person Area Code & Daytime 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 &  
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  
Tallahassee, FL 32314

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

H10000231505

Articles of Amendment  
to  
Articles of Incorporation  
of  
**Specialty Lighting & Bulbs, Inc.**

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

P10000065236

(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:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**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)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_ (Florida street address)

\_\_\_\_\_ (City)

\_\_\_\_\_, Florida  
(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 Registered Agent, if changing*

FILED  
10 OCT 27 PM 4:02

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>	<u>Address</u>	<u>Type of Action</u>
VP	Marietje Van Heerden	11580 W. State Rd. 84 Dover, NJ 33325	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
VP	Silvana Guslandi	11580 W. State Rd. 84 Dover, NJ 33325	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:  
(attach additional sheets, if necessary). (Be specific)

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F. If an amendment provides for an 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)

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H10000231505

The date of each amendment(s) adoption:

8/11/10

(date of adoption is required)

Effective date if applicable:

10/14

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

- ☒ The amendment(s) was/were adopted 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.

Dated 10/15/10

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)

Silvana Guskandi

(Typed or printed name of person signing)

President

(Title of person signing)

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