Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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: (850)617-6380

From:

Account Name : HTSPANUSA INC Account Number : 120070000099 Phone : (954)478-2706 Fax Number : (954)934-0334

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

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COR AMND/RESTATE/CORRECT OR O/D RESIGN CAPITOL KITCHENS INC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

2-16-12 2/14/2012 12:24 PM

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D S		COVER LETTER	:
TO: Amendment Se Division of Co			
	DRATION: CAPITOL		,
DOCUMENT NUI	MBER: P110000819	35	
The enclosed Article	es of Amendment and fee are s	ubmitted for filing.	
Please return all cor	respondence concerning this m	atter to the following:	
	JUAN E ZORNO	SA	
		Name of Contact Perso	n
	PRESIDENT	·	
		Firm/ Company	
	668 PERDIDO H	IEIGHTS	
		Address	
	GREENACRES,		
		City/ State and Zip Coo	le
	E-mail address: (to be u	sed for future annual report	t notification)
For further informati	on concerning this matter, plea	se call:	
JUAN ZORN	NOZA	at (561	215 58 25
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	O\$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

to

· Articles of Amendment to Articles of Incorporation

•	of					
CAPITOL KITCHENS INC	•					
(Name of Corporation as currently filed	with the Florida	Dept. of State)				
P11000081935						
(Document Number of Cu	orporation (if know	vn)				
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	tatutes, this <i>Florid</i>	a Profit Corporation	adopts the f	allowing	; amend	ment(s)
A. If amending name, enter the new name of the corp CAPITOL REMODELING AND DE					The n	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abo	"corporation," "c			r the ahi	hreviati	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u></u>	•				
				mvav , u		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				BA	72	
(Adming marks)				\$ 24	FE	
				n.	=======================================	Encluses Chémitres
				115		
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	oMce address in ice address:	Florida, enter the na	me of the		3	٠ ا
Name of New Registered Agent				0.35	Ť	
				Sam.		
	(Florida street addi	ess) .				
New Registered Office Address:		, Florida	a			
	(Cip)		(Zip Co	ide)		
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an		i accept the obligation	ns of the pos	sition.		
Signature of New R	Registered Agent, in	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 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.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	·
_X Add	<u>ş</u> y	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove			
2) Change Add Remove		<u> </u>	
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove		<u> </u>	
6) Change Add Remove			

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provisions fo	or <u>implementi</u>	ng the amend	nge, reclassific lment if not ec	cation, or cance ontained in the	ellation of issued amendment itse	shares, lf:
provisions fo	or <u>implementi</u>	ng the amend	nge, reclassific	cation, or cance	ellation of issued amendment ilse	shares, lf:
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provisions fo	or <u>implementi</u>	ng the amend	nge, reclassific	cation, or cance	ellation of issued amendment itse	shares, If:

The date of each amendment(s) adoption	02/14/2012
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no mine man 20 mays upter university no wate)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.
	y the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):
"The number of votes cast for the a	mendment(s) was/were sufficient for approval
by	(voting group)
	(vicing group)
The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder
Dated 02/14/2012	·
Signature P	JOAN I ZORNOZA
selected, by an i	resident or other officer - if directors or officers have not been incorporator - if in the hands of a receiver, trustee, or other court iary by that fiduciary)
JUAN	N E ZORNOZA
· · · · · · · · · · · · · · · · · · ·	(Typed or printed name of person signing)
PRE	SIDENT
\	(Title of nerson pirming)