0000303

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000133272 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : NATIONS BUSINESS CENTER, INC.

Account Number: I20000000238 Phone : (305)591-944B

; (954)753-3447 Fax Number

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

COR AMND/RESTATE/CORRECT OR O/D RESIGN 1236 HAMMONDVILLE INC



Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

Help

JUN 0 5 2015

C MCNAIR

Articles of Amendment to Articles of Incorporation of

	· ·	Teneral City
1236 HAMMONDVILLE INC		
(Name of Corpo	oration as currently filed with the Florida Dept. of State)	
P15000030388		
(D)	ocument Number of Corporation (if known)	
	• • • •	
Pursuant to the provisions of scotion 607.1006, Flats Articles of Incorporation:	orida Statutes, this Florida Profit Corporation adopts the fo	llowing amendm
A. If amending name, enter the new name of the	ne cornoration	-4-1-4
THE PLAN WHILE AND THE PLAN WHILE AND A	RME PROPERTY INC	
	word "corporation," "company," or "Incorporated" or	The ner
vord "chartered," "professional association," or B. <u>Enter new principal office address, if appli</u> e	able:	must contain th
Principal office address <u>MUST BE A STREET</u>	<u>4DDRESS</u>)	
•		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE		
 If amending the registered agent and/or reg new registered agent and/or the new register 	istered office address in Florida, enter the name of the red office address:	
Name of New Registered Agent		
		 -
	(Florida street address)	
	, in the second of the second	
New Registered Office Address:	, Florida,	(Zip Code)
	(0.09)	1200 0100
New Registered Agent's Signature, if changing	Registered Agent:	
hereby accept the appointment as registered age	nt. I am familiar with and accept the obligations of the pos	ition.
		
ı	Signature of New Registered Agent, if changing	

Page 1 of 4

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 Doc 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>Iohn Doe</u>	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add	•		
Remove			
3) Change			
Add			
Romove			
4) Change	-		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

тивы <i>виатора</i>	dding additional Art I sheets, if necessary).	(Be specific)	·		
				············	
<u> </u>					
		 _			
·				·········	<u> </u>
	··			 _	
				•	
<u></u> _	<u></u>		_		
			. <u> </u>		
					
provisions for in	t provides for an excl mplementing the ame	iange, reclassing indirect if not co	atton, or cancell ntained in the ar	ation of exued sn nendment itself:	Brex.
(if not applie	cable, indicate N/A)				
<u>-</u>					

Page 3 of 4

06/04/2015	
The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cust 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	
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)	
appointed inductary by that inductary)	
LEZVAD NEMATI	_
(Typed or printed name of person signing)	
WP. 2 Chen	
(Title of person signing)	

Page 4 of 4