

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.

(((H15000288651 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 : EXPRESS CORPORATE FILING SERVICE INC.

Account Number: I2000000146

: (305)444-4994

Fax Number

: (305)444-4977

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

Fund 3	Address:			
FMA11	Address:			

COR AMND/RESTATE/CORRECT OR O/D RESIGN QUIK PAK, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

DEC 8 2015

C LEWIS

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment Articles of Incorporation of

15 DEC -7 AM 9: 27

QUIK PAK, INC.	
	n as currently filed with the Florida Dept. of State)
P15000044984	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ac	"corparation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the bbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	
	· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<i></i>
D. If amending the registered agent and/or registere new registered agent and/or the new registered of	d office address in Florida, enter the name of the ffice address:
Name of New Registered Agent 40	arta 5 Fernandez
923	1560 1657
	(Florida street address)
New Registered Office Address:	Kliami Florida 33/65
	(City) (Zip Code)
New Registered Agent's Signature, tf changing Regis I hereby accept the appointment as registered agent. I d	tered Agent: am familiar with and accept the obligations of the position.
@ Mails	Samo
Signati	ure of New Registered Agent, of 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.

X Change	<u>PT J</u>	John Doc				
X Remove	$\overline{\Lambda}$ \overline{V}	Mike Jones				
X Add	<u>sv</u> s	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s			
1) Change						
Add						
Remove						
2) Change	P/D	OSCAR A. RODRIGUEZ-FEO	9231 SW 16 STREET			
Add			MIAMI, FL 33165			
XX Remove						
3)Change	<u>PISID</u>	<u> Marta S. Fernande</u>	2 1234 5 Dixie HWY Hiami, FL 33146			
X Add			Hlami, FL 33146			
Remove						
4) Change						
Add						
Remove						
5)Change						
Add						
Remove						
6) Change						
Add						
Remove						

(amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	<u>v</u> .	
			
	,		V-VIII.
	<u> </u>	M.A.A	
			
		~	
****		······································	
		····	
an amendment provides for an exch	nange, reclassification, or	cancellation of issue	d shares.
rovisions for implementing the ame	ndment if not contained	in the amendment its	elf:
(if not applicable, indicate N/A)	1 - 10- 100	01)	
MURTA OFERN	CLOSS (40.	101	
Harta 5 Fern John Cast	m (i00)		
,,		- <i>}</i>	
· · · · · · · · · · · · · · · · · · ·	 		

/2015/MON 12:22 PM	,	FAX No.	; ;	P. 005
		ĐIVÌSÍ	for there is	4.1.
The date of each amendment(s) adoption date this document was signed.	: Nov. 17, 2015	15 DE	C -7 AH 9	if other than the
Effective date if applicable:				
	(no more than	90 days after am	endment file da	(e)
Note: If the date inserted in this block do document's effective date on the Departmen	es not meet the applit of State's records.	licable statutory f	Iling requireme	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The for approval.	he number of vote	s cast for the ar	nendment(s)
☐ The amendment(s) was/were approved b must be separately provided for each vo	y the shareholders th ting group entitled to	rough voting grou o vote separately	ips. The follow on the amendm	ing statement ent(s):
"The number of votes cast for the a	mendment(s) was/w	ere sufficient for a	pproval	
by) by	
	(voting group)			
The amendment(s) was/were adopted by action was not required.	the board of director	s without shareho	lder action and	shareholder
The amendment(s) was/were adopted by action was not required.	the incorporators wit	thout shareholder	action and shar	ehold er
Dated	D +	-		
Signature W/ 142	C. e 47			
	president or other off			
seiscred, by an i	incosporator – if in thi iary by that fiduciary	ne hands of a rece	iver, trustee, or	other court
John Ca	· /	est y		
	Typed or printed	name of person s	igning)	

Vice-President

(Title of person signing)