P09000031718

(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	: #)
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COVER LETTER

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			11.37. 19.07			
			CAR ACADER			
	COVER LETTER					
TO: Amendment Section Division of Corporations			16 APRILITIES ON THE SECONDARY			
NAME OF CORPORATION: ABIGAIL CO	OURIER SERVICES, INC.		29			
DOCUMENT NUMBER: P09000031718						
The enclosed Articles of Amendment and fee	are submitted for filing.					
Please return all correspondence concerning th	is matter to the following:					
	VANESSA TORRES	;				
	Name of Contact Person					
	ALL AMERICAN PERMIT	S LLC				
	Firm/ Company					
	Address					
	MIAM1 FL 33166					
	City/ State and Zip Coo	le				
:	permits2009@live.com	m .				
E-mail address: (to	be used for future annual report	t notification)				
For further information concerning this matter,	please call:	·				
VANESSA TORRES	at (882-5264				
Name of Contact Person		ode & Daytime Telephone Number				
Enclosed is a check for the following amount n	nade payable to the Florida Dep	artment of State:				
□ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Sta		□\$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	Ameno Divisio Cliftor	Address dment Section on of Corporations on Building Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



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

P09000031718

ent(s) to

	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	,1006, Florida Statutes, th	is Florida Profit Corporation	n adopts the following amendme
A. If amending name, enter the new na	ame of the corporation:		
		IER SERVICES INC	The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations of the contract of t	nation "Corp," "Inc," or	"Co". A professional corp	orporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		840 SE 10TH PL	
		HIALEAH, FL 33010	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	icable: OFFICE BOX)	840 SE 10TH PL	
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	HIALEAH, FL 33010	
D. If amending the registered agent ar			name of the
new registered agent and/or the ne	ABIGAIL CRUZ	<u>:ss;</u>	
Name of New Registered Agent			
		SE 10TH PL	
	·	street address)	22010
New Registered Office Address:	HIALEAH	(0)	, Florida
		(City)	(Zip Code)
Nam Dagistanad Amerika Simostona ifi a	hamaian Daristanad Amara	4.	
New Registered Agent's Signature, if c I hereby accept the appointment as regis.			ions of the position.
		2	- Aller -
	Signature of New	Registered Agent, if changing	าย

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 Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	<u>nes</u>		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
I) Change		_		-	
Add					
Remove					
2) Change		_			
Add					
Remove					
3) Change					
Add					
Remove					
4) Change		_		_	
Add					
Remove					
5) Change					
5) Change	•	_		-	
Add				-	
Remove					
6) Change		_		-	
Add					
Remove					

Attach additional sheets, i	dditional Articles, e if necessary). (Be	specific)	•		
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f an amendment provide	es for an exchange,	reclassification, or	cancellation of issue	ed shares,	
provisions for implement (if not applicable, inc	iting the amename dicate N/A)	nt it not contained ii	i the amendment its	seit:	
•		NA			
				· · · · · · · · · · · · · · · · · · ·	

The date of each amondment	04/08/16	
The date of each amendment date this document was signed		, if other than the
aute mis abeament was signed	04/08/16	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on the	this block does not meet the applicable statutory filing requirements, this date who Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement and 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)	
	(voting group)	
action was not required. The amendment(s) was/wer	re adopted by the board of directors without shareholder action and shareholder action by the incorporators without shareholder action and shareholder	
action was not required.		
04/08. Dated	/16	
Signature	ac	
se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	ABIGAIL CRUZ	
	(Typed or printed name of person signing)	
	OWNER	
	(Title of person signing)	