154652

(Requestor's Name)	_
(Address)	
(Address)	
(Addiess)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	





300310433493

03/16/18--01024--013 **35.00



MAR 1 9 2018

I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORA	TION: Sherry Me	inufacturing Co.	J Inc
DOCUMENT NUMBE			
The enclosed Articles of	Amendment and fee are sub	mitted for filing.	
Please return all correspo	ondence concerning this matt	er to the following:	
_	Scott Coltu	ne	
		Name of Contact Person	
	Shery Mai	Jufucturing Con	Inc.
		Firm/ Company	
	840 SW 81 A	ve	
_		Ve Address	
_	North Lauderdale	City/ State and Zip Code	
	E-mail address: (to be us concerning this matter, pleas		notification)
South Coltun	ÿ	at (.561	de & Daytime Telephone Number
Name o	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address Indiment Section Is sion of Corporations Box 6327 Is shassee, FL 32314	Ameno Divisio Cliftor	Address diment Section on of Corporations of Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

	Articles of Ame to Articles of Incor of	poration All S
Sherry Mon	Infacturing (0)	filed with the Florida Dept. of State)
· _	Corporation as currently	nicu with the Charles Styles
154 052	(Document Number of C	Corporation (if known)
ts Articles of Incorporation:		Iorida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new nan	ne of the corporation:	The new
"Corn " "Inc " or Co" or the designal	tion "Corp." "Inc," or "C	" "company," or "incorporated" or the abbreviation to". A professional corporation name must contain the
word "chartered," "professional association R. Enter new principal office address, if	on," or the abbreviation - P f applicable:	North Lauderdale, FL 33068
word "chartered," "professional association of the new principal office address, if (Principal office address MUST BE A ST)	on, "or the abbreviation P f applicable: REET ADDRESS) cable:	7.A.
word "chartered," "professional association B. Enter new principal office address, if (Principal office address MUST BE A ST) C. Enter new mailing address, if applic (Mailing address MAY BE A POST Office) D. If amending the registered agent and new registered agent and/or the new Mame of New Registered Agent	on, "or the abbreviation P f applicable: REET ADDRESS) cable: DFFICE BOX) d/or registered office address: v registered office address:	840 SW 81 Ave North Lauderdale, FL 33068 840 SW 81 Ave North Lauderdale, FL 33068 ess in Florida, enter the name of the
word "chartered," "professional association B. Enter new principal office address, if (Principal office address MUST BE A ST) C. Enter new mailing address, if applic (Mailing address MAY BE A POST Office) D. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent	on, "or the abbreviation P f applicable: REET ADDRESS) cable: DFFICE BOX) d/or registered office address: v registered office address:	840 SW 81 Ave North Lauderdale, FL 33068 840 SW 81 Ave North Lauderdale, FL 33068 Sess in Florida, enter the name of the

Signature of New Registered Agent, if 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.

, and stary said	m, 57 m as	
PT John	1 Doe	
<u>V</u> <u>Mik</u>	e Jones	
<u>SV</u> <u>Sall</u>	y Smith	
<u>Title</u>	<u>Name</u>	<u>Addres</u> s
VSD.	Sherry Zimand	3281 NW 65th 5. Miami FL 33147
		MIami FL 33/47
	PT John V Mik SV Sall Title	V Mike Jones SV Sally Smith

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)	amending or adding additional sheets, if nece	nal Articles, enter change(s) here: essary). (Be specific)
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)		W/4
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		The state of the s
(if not applicable, indicate N/A)	lf an amendment provides fo	r an exchange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	provisions for implementing	the amendment if not contained in the amendment users
	(if not applicable, indica	ie N/A)
	7	
	<i>N/1</i>	
	/	
		
		

an the French amondment(s) a	doption:, if o	ther than the
the date of each amendment(s) a date this document was signed.	toption.	
date this document was a given	u I o	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	block does not meet the applicable statutory filing requirements, this date will not be	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
☐ The amendment(s) was/were apmust be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
bu	(voting group)	
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	lopted by the incorporators without shareholder action and shareholder	
DatedA	Sexte Cottus	
(By a selec	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	(Title of person signing)	
	(Title of person signing)	