

702030

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

12-8-09



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 DEC -4 AM 9:13

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 20, 2009

ERNESTO SANCHEZ
762 SW 18TH AVENUE
MIAMI, FL 33135

SUBJECT: PINWOOD HOUSE INCORPORATED
Ref. Number: 702030

We have received your document for PINWOOD HOUSE INCORPORATED .
However, the enclosed document has not been filed and is being returned to you
for the following reason(s):

The document you submitted has been prepared pursuant to profit statutes
(chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit
corporation, this document should be filed pursuant to chapter 617, Florida
Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or
your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call
(850) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 109A00036113

2009 DEC -4 AM 10:00
TALLAHASSEE
STATE OF FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PINEWOOD HOUSE INC

DOCUMENT NUMBER: 702030

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ERNESTO SANCHEZ

(Name of Contact Person)

(Firm/ Company)

762 SW 18TH AVE

(Address)

MIAMI, FL 33135

(City/ State and Zip Code)

ERNESTO@ASLANTAXSERVICE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PERRY MARTINO

(Name of Contact Person)

at (631) 334-8048

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$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

Articles of Amendment
to
Articles of Incorporation
of

PINEWOOD HOUSE INC

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

702030

(Document Number of Corporation (if known))

FILED
2009 DEC -4 AM 9:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or " Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

PINEWOOD HOUSE INC

520 EUCLID AVE STE 1

MIAMI BEACH, FL 33139

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

PINEWOOD HOUSE INC

762 SW 18TH AVE

MIAMI, FL 33135

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

_____, Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
PD	RAFAEL CABEZAS	520 EUCLID AVE APT #7 MIAMI BEACH, FL 33139	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
D	LAZARO GARCIA	520 EUCLID AVE APT #6 MIAMI BEACH, FL 33139	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
S	NANCY CHANG	520 EUCLID AVE APT #4 MIAMI BEACH, FL 33139	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

ADD: JESUS PRADO

TITLE: PRESIDENT

ADDRESS: 520 EUCLID AVE #1 MIAMI BEACH, FL 33139

ADD: ELIZABETH FERNANDEZ

TITLE: VICE PRESIDENT

ADDRESS: 520 EUCLID AVE #2 MIAMI BEACH, FL 33139

ADD: PERRY MARTINO

TITLE: TREASURER

ADDRESS: 520 EUCLID AVE #10 MIAMI BEACH, FL 33139

The date of each amendment(s) adoption: 09/01/09

(date of adoption is required)

Effective date if applicable: 09/01/09

(no more than 90 days after amendment file date)

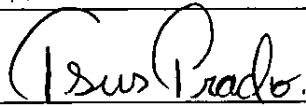
Adoption of Amendment(s)

(CHECK ONE)

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 11/11/09

Signature



(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

JESUS PRADO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)