FZ1319

(Re	equestor's Name)	·	
(Ad	ldress)		
(Ac	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	ısiness Entity Nar	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		
ν.	Office Use On	ılv	



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SECONDARY FOR STATE

CRIM CM.

Articles of Amendment to Articles of Incorporation of

FINER SCRAP PROCESSORS OF TAM	PA, INC.
(Name of Corporation as currently filed with the Fl	orida Dept. of State)
F21319	7 N
(Document Number of Corporation (if	(known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	
·	器 36
A. If amending name, enter the new name of the corporation: FINER CORPORATION	>
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	13615 LYTTON WAY
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	TAMPA, FLORIDA 33624
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13615 LYTTON WAY
(manning maness) MATA BELLA COL CALLED TOTAL	TAMPA, FLORIDA 33624
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	
Name of New Registered Agent	
13615 LYTTON	WAY
(Florida stre	···
New Registered Office Address: TAMPA	. Florida 33624
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	
	and accept the congunous of the position.
Signature of New Registered A	gent, 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.

Example: X Change	<u>PT</u>	John Doe		14 18 18
X Remove	<u>v</u>	Mike Jones		TO AS TO
X Add	<u>sv</u>	Sally Smith		THE SECRETARY ALL AHASE
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	To P I
 1): Change				2:35
Add Remove				
2) Change				
Add				
Remove 3) Change				<u> </u>
Add				
Remove				
4) Change			····	
Add Remove				
5) Change				
Add Remove				
6) Change				
Add				
Remove				

. If amending or adding additional Articles, enter change(s) here:	14 SET SECON TALLON
(Attach additional sheets, if necessary). (Be specific)	SS SE
OT APPLICABLE	平 P 2
	(A)
	20 0
	SH O
UB 8 40 F 10 1 1 1 1 0 0 F 10 10 10 F	<u> </u>
	
If an amendment provides for an exchange, reclassification, or cancellation o	fissued shares,
provisions for implementing the amendment if not contained in the amendm	ent itself:
(if not applicable, indicate N/A)	
OT APPLICABLE	
	-

date this document was signed.	(option:	, ii ouier uian ui
Effective date if applicable:		_
	(no more than 90 days after amendment file date)	
	TAL SE	=======================================
Adoption of Amendment(s)	(CHECK ONE)	SEP.
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	22 PH
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	2:36
"The number of votes cast	for the amendment(s) was/were sufficient for approval	>
by	(voting group)	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	9-17-14	
Signature	Auh Defeus	_
	irector, president or other officer - if directors or officers have not been	
	i, by an incorporator – if in the hands of a receiver, trustee, or other court	
appoin	ed fiduciary by that fiduciary)	
	MICHAEL FINER	_
	(Typed or printed name of person signing)	
	PRESIDENT	_
	(Title of person signing)	

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: FINER SCRAP PROCESSORS OF TAMPA, INC. DOCUMENT NUMBER: F21319 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MICHAEL FINER Name of Contact Person Firm/ Company 13615 LYTTON WAY Address TAMPA, FLORIDA 33624 City/ State and Zip Code mfiner@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (813) 416-6646

Area Code & Daytime Telephone Number MICHAEL FINER Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301



September 3, 2014

MICHAEL FINER 13615 LYTTON WAY TAMPA, FL 33624

SUBJECT: FINER SCRAP PROCESSORS OF TAMPA, INC.

Ref. Number: F21319

We have received your document for FINER SCRAP PROCESSORS OF TAMPA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Upon receipt of your letter and/or check(s) totaling \$35.00, no document was found. Please send your document with any fees due to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

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

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair Regulatory Specialist II

Letter Number: 714A00018822

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