M25914

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EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: The Home DOCUMENT NUMBER: M25914	of Watches and	Jewels Inc.
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	•
Leticia Piloto, Es	q.	
	Name of Contact Person	n
Leticia M. Piloto,	PA	
	Firm/ Company	
999 Ponce de Le	on Blvd. PH 113	35 ·
	Address	
Coral Gables, FL	33134	
	City/ State and Zip Cod	e
info@pilotolaw.com		`
<u> </u>	sed for future annual report	notification)
For further information concerning this matter, plea	se call:	,
Leticia M. Piloto, Esq.	at (305	, 461-4681
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee \$\text{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	

Articles of Amendment to Articles of Incorporation of

The Home of Watches a	ind Jewels Inc.			
(Name of Corporation a	s currently filed with the Florida D	ept. of State)	_	
(Docume	nt Number of Corporation (if known)		_ ,	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida I</i>	Profit Corporation adopts the follow	ing amendment(s) to)
A. If amending name, enter the new n	ame of the corporation:		•	
			The new	
B. Enter new principal office address, (Principal office address MUST BE A S C. Enter new mailing address, if appl (Mailing address MAY BE A POST) D. If amending the registered agent and new registered agent and/or the new	if applicable: TREET ADDRESS) icable: OFFICE BOX) d/or registered office address in Fl w registered office address:	orida, enter the name of the	12 FEB 21 PH 12: 16 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Name of New Registered Agent	Naiquel Barrios			
,	1876 SW 57 AVE			
	(Florida street addres	(s)		
New Registered Office Address:	MIAMI	. Florida 33155		
	(City)	(Zip Code)	_	
New Registered Agent's Signature, if cl		,		

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> J	ohn Doe	
X Remove	<u>V</u> <u>N</u>	Mike Jones	
X Add	<u>SV</u> <u>S</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change Add Remove	Р	Jose R. Juvier	13140 NW 7 TERRACE MIAMI FL 33188 US
2) Change Add X Remove	<u>T</u>	Caridad Juvier	13140 NW 7 TERRACE MIAMI FL 33155 US
Change X Add Remove	PTD	Naiquel Barrios	1876 SW 57th Ave Miami, FL 33155
4) Change Add Remove			
5) Change Add Remove			<u> </u>
6) Change Add Remove			

If amending or adding additional Articles, enter change(attach additional sheets, if necessary). (Be specific)		•		
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	on, or cancellat	ion of issued sl	nares.	
f an amendment provides for an exchange, reclassification provisions for implementing the amendment if not contact (if not applicable, indicate N/A)	ined in the am	endment itself:		
provisions for implementing the amendment if not conta (if not applicable, indicate N/A)	ined in the amo	endment itself:		
provisions for implementing the amendment if not conta	ined in the am	endment itself:		
provisions for implementing the amendment if not conta (if not applicable, indicate N/A)	ined in the am	endment itself:		
provisions for implementing the amendment if not conta (if not applicable, indicate N/A)	ined in the am	endment itself:		
provisions for implementing the amendment if not conta (if not applicable, indicate N/A)	ined in the am	endment itself:		
	ined in the am	endment itself:		

The date of each amendment(s) adoption: $\frac{02/17/2812}{}$
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
02/17/2012
Dated 627 77 20 12
Signature FORES
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Naiquel Barrios
(Typed or printed name of person signing)
PTD
(Title of person signing)