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## COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: J K	POOKINC.			
DOCUMENT NUMBER: M93808				
The enclosed Articles of Amendment and fee are sub	omitted for filing.			
Please return all correspondence concerning this matt	ter to the following:			
RONALD.	PAVELLAN			
	Name of Contact Person			
	Firm/ Company			
8101 NW 1	169 Terrace Address L 33016.			
Linni F	Address 7			
MIMMIT	City/ State and Zip Code			
E-mail address: (to be use	ed for future annual report notification)			
For further information concerning this matter, please	e call:			
MAI quel Liste	at(954) 955 7089.			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made p	payable to the Florida Department of State:			
\$35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address	Street Address			
Amendment Section	Amendment Section			
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building			
Tallahassee, FL 32314	2001 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment

to

## Articles of Incorporation

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J&R POOBINC.	
(Name of Corporation as currently	y filed with the Florida Dept. of State)
N 93808	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this life Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or " word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent / / U TVE	
New Registered Office Address: 356/A/41S	Circle NAPIU 2-205, Hialeah (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	t <u>:</u> with and accept the obligations of the position. A
Signature of New I	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.

Mike Jones, V as Remove	, and Sal	ly Smith, SV as an Add.	
Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	1	RONALD P AVELLAN	8101 NW 169 1errace
Add Remove			MIAMI, FL 33016
2) Change	P	Maiquel Liste	3561 Altis Circle
Add Remove			Apto 2-205, Hiales FL, 33018
3 ) Change			
Add			
4) Change			
Add			
3) Change			
Add Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)	
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the state of the s	
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)	

The date of each amendment(s) ado	otion:		_, if other than the
late this document was signed.			
Effective date if applicable:		after amendment file date)	
	(no more than 90 days o	after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicable startment of State's records.	atutory filing requirements, this date will	not be listed as the
Adoption of Amendment(3)	(CHECK ONE)		
The amendment(s) was/were adopt by the shareholders was/were suff		er of votes cast for the amendment(s)	
☐ The amendment(s) was/were appromust be separately provided for each	oved by the shareholders through vo ach voting group entitled to vote se	oting groups. The following statement parately on the amendment(s):	
	r the amendment(s) was/were suffic		
by	(voting group)		
	(voting group)		
☐ The amendment(s) was/were adop action was not required.	ted by the board of directors withou	it shareholder action and shareholder	
☐ The amendment(s) was/were adop action was not required.		archolder action and shareholder	
Dated	2/18/2018  Sector president or other officer – if		
	$\mathcal{L}$		
Signature	and an other officer if	directors or officers have not been	<del></del>
12, 14.	cztor, prosiderii or daria	s of a receiver, trustee, or other court	
	d fiduciary by that fiduciary)	, 0, 2, 1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,	
-	Typed of printed name of	$\frac{1}{S} + e$ of person signing)	_ <del>_</del>
	POFSI	LeaT	
-	(Title of pers	on signing)	