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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 APR 14 AM 9:20

*Amend*

C.COULLIETTE

APR 14 2010

EXAMINER

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Alpha 2000 Community Development Inc.

DOCUMENT NUMBER: N 99 000005919

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

Please return all correspondence concerning this matter to the following:

Sherry Ramdeen  
(Name of Contact Person)

Alpha 2000  
(Firm/ Company)

3529 Griffen Rd.  
(Address)

Ft. Lauderdale, FL 33312  
(City/ State and Zip Code)

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

For further information concerning this matter, please call:

Sherry Ramdeen at (954) 873-0007  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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

- |   |   |  |  |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 19, 2010

SHERRY RAMDEEN  
ALPHA 2000  
3529 GRIFFIN RD  
FT LAUDERDALE, FL 33312

SUBJECT: ALPHA 2000 COMMUNITY DEVELOPMENT, INC.  
Ref. Number: N99000005919

RECEIVED  
2010 APR 14 AM 8:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for ALPHA 2000 COMMUNITY DEVELOPMENT, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to send the first page of your form for the amendment of this corporation. Please locate the missing page and submit with a copy of this letter.

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) 245-6903.

Cheryl Coulliette  
Regulatory Specialist II

Letter Number: 410A00006825



**Fax Transmittal Form**

**To: CHERYL**

**Phone:**

**Fax: 1-850-245-6897**

**From : Alpha 2000**

**Fax: 954-876-1431**

**Date sent: 4/14/10**

**Number of pages including cover page: 5**

**Message:**

**Non-Profit**



**Organization**

**COVER LETTER**

**TO: Amendment Section  
Division of Corporations**

**NAME OF CORPORATION: ALPHA 2000 COMMUNITY DEVELOPMENT**

**DOCUMENT NUMBER: N99000005919**

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

Please return all correspondence concerning this matter to the following:

**SHERRY RAMDEEN**

(Name of Contact Person)

(Firm/ Company)

**1857 S DIXIE HWY**

(Address)

**POMPANO BEACH, FL 33060**

(City/ State and Zip Code)

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

For further information concerning this matter, please call:

**SHERRY RAMDEEN**

(Name of Contact Person)

at ( **954** ) **873-0007**

(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

ALPHA 2000 COMMUNITY DEVELOPMENT INC.  
(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known))

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)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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 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

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DIVISION OF CORPORATIONS  
10 APR 14 AM 9:20

**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>  |
|--------------|--------------|---|--|
| D            | LISA MATUTE  | 1857 S DIXIE HWY<br>POMPANO BEACH, FL 33060 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
| D            | CHAD RAMDEEN | 1857 S DIXIE HWY<br>POMPANO BEACH, FL 33060 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |              |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

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

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The date of each amendment(s) adoption: 4/2/10  
(date of adoption is required)

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 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 4/2/10

Signature Sherry Ramdeen

(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)

SHERRY RAMDEEN

(Typed or printed name of person signing)

SD

(Title of person signing)