# P0100000 3/00

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#### COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State:

**Mailing Address** 

☐ \$35 Filing Fee

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

\$43.75 Filing Fee & Certificate of Status

#### **Street Address**

☐ \$43.75 Filing Fee &

Certified Copy

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Additional copy is enclosed)

☐ \$52.50 Filing Fee

Certificate of Status Certified Copy

(Additional Copy is enclosed)

#### **Articles of Amendment**

### Articles of Incorporation of

THE JETS	KI GA	RAGE.	INC.	
(Name of Corporation as currently f	11ed with the Floi	nda Dept. ot∕Sta	<u>te</u> )	
(Document Number of	Corporation (if k	nown)		
Pursuant to the provisions of section 607.1006, Floramendment(s) to its Articles of Incorporation:	•	,	Corporation add	pts the following
A. If amending name, enter the new name of the c	orporation:			
				_The new 🧀
name must be distinguishable and contain the wo abbreviation "Corp.," "Inc.," or Co.," or the design name must contain the word "chartered," "profession	nation "Corp," ".	Inc," or "Co". A	1 professional o	
B. Enter new principal office address, if applicable	a•		<b>≱</b> ∽.	6 1
(Principal office address <u>MUST BE A STREET ADI</u>		· · ·	<b>1</b>	
			ں	3
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO	<u> </u>			- 92 E
				7
D. If amending the registered agent and/or registe	red office addres	s in Florida, ente	er the name of t	the
new registered agent and/or the new registered				
Name of New Registered Agent:				
			<del>-</del>	
New Registered Office Address:	(Florida stree	et address)	_	
	·	•	F1 '1	
<del></del>	(City)	(Zip	_, Florida <i>Code)</i>	<del></del>
	•	(-T		
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		h and accept the o	obligations of th	e position.
Signatu	re of New Registe	red Agent if char	nging	

## 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>	Name	<u>Address</u>	Type of Action
PD_	Rodriguez Mananela Angela M. Torres	A. 17450 NW854 miami Fl 33015	Add Remove
PD_	Angela M. Torres	17450 NW 85hav miami F133015	Add Remove
********			Add Remove
	ding or adding additional Articles, enter additional sheets, if necessary). (Be specif		
provisi	mendment provides for an exchange, reclions for implementing the amendment if not applicable, indicate N/A)	assification, or cancellation of issociation of iss	ued shares, tself:

The date of each amendment(s) adoption:					
Effective date if applicable:	11/29/10  11/29/10				
(no	more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)				
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.				
	proved by the shareholders through voting groups. The following statemen each voting group entitled to vote separately on the amendment(s):				
"The number of votes cast f	for the amendment(s) was/were sufficient for approval				
by	<u> </u>				
(voti	ing group)				
The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and shareholder				
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder				
Dated	29/10				
Signature	Orgelatores				
selected,	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)				
	Angela M. Towes (Typed or printed name of person signing)				
	P.D.				
	(Title of person signing)				