# P01000111802

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
•		
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
	<del> </del>	





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Amera.
C.COULLIETTE
SEP 11 2009
EXAMINER

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORE	PORATION: RIDEL & S	ON SPECIALTY CONTRA	ACTORS INC
DOCUMENT NU	MBER:	P01000111802	
The enclosed Artic	les of Amendment and fee are	submitted for filing.	
Please return all co	rrespondence concerning this	matter to the following:	
	EDUA	ARDO A AZOY EA	
•		ne of Contact Person	
	RIDEL & SON SPE	ECIALTY CONTRACTORS INC	
•		Firm/ Company	<del></del>
	1611	0 STERLING RD	
		Address	
	FORT LA	UDERDALE, FL 33331	
		State and Zip Code	<del></del>
	EAZOY@	AZOYTAX.COM for future annual report notification)	
	E man dadress, (to be used .	and the second s	
For further informa	ation concerning this matter, p	lease call:	
	ARDO A AZOY EA of Contact Person	at ( 954 ) 229 Area Code & Daytime Telep	9-1652hone Number
Enclosed is a check	k for the following amount ma	de payable to the Florida Departm	ent 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



### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 3, 2009

EDUARDO A. AZOY EA RIDEL & SON SPECIALTY CONTRACTORS, INC. 16110 STERLING RD FT LAUDERDALE, FL 33331

SUBJECT: RIDEL & SON SPECIALTY CONTRACTORS, INC.

Ref. Number: P01000111802

We have received your document for RIDEL & SON SPECIALTY CONTRACTORS, 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):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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: 609A00029455

RECEIVE BOSELATE

Division of Corporations - P.O. ROY 6327 - Tallahassaa Florida 32314

#### **Articles of Amendment**

c to .

#### **Articles of Incorporation**

of

#### RIDEL & SON SPECIALTY CONTRACTORS, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

#### P01000111802

(Document Number of Corporation (if known)

	N/A			The ne
name must be distinguishable and contai abbreviation "Corp.," "Inc.," or Co.," or t name must contain the word "chartered," "p	the designation "C	Corp," "Inc," or "C	o". A professional	ted" or the corporation
B. Enter new principal office address, if a (Principal office address <u>MUST BE A STR</u>		<u>N/A</u> .		<del></del>
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF)  D. If amending the registered agent and/onew registered agent and/or the new reg	FICE BOX) or registered office		, enter the name of	09 SEP 11 PM 3: 52
Name of New Registered Agent:	N/A			
New Registered Office Address:	(Flor	ida street address)	····	
	N/A		, Florida	
	(City)	)	(Zip Code)	

## 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> Fitle</u>	<u>Name</u>	Address	Type of Action
D	NUVIA L. ABIGANTUS	15751 SHERIDAN ST No. 187 SOUTHWEST RANCHES FLORIDA 33331	
			_
			_
E. If amend (attach ad	ding or adding additional Articles, endeditional sheets, if necessary). (Be sp	ter change(s) here: ecific)	
		THE POLICE OF TH	
F. <u>Ifana</u>	nendment provides for an exchange, ons for implementing the amendment	reclassification, or cancellation of is	sued shares,
(if r	ons for implementing the amendment of applicable, indicate N/A)	it not contained in the amendment	<u>riseri.</u>
N/A			

The date of each amendmen	t(s) adoption: SEPTEMBER 1, 2009
Effective date <u>if applicable</u> :	SEPTEMBER 1, 2009
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_SEF	PTEMBER 8, 2009
(B)	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	RIDEL LINARES
	(Typed or printed name of person signing)
	PRESIDENTE
	(Title of person signing)