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COR AMND/RESTATE/CORRECT OR O/D RESIGN MARTINEZ & ESPINOSA C.P.A., P.A.

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PAGE 01/06

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION:	MARTINEZ AND ESPINOSA CPA PA			
DOCUMENT N	UMBER:	P02000013194			
The enclosed Are	icles of Amendment and fe	e are submitted for filing.			
Please return all c	correspondence concerning	this matter to the following:			
<i>, t</i>		ANDY MARTINEZ			
	•	Name of Contact Person			
	AN	DY MARTINEZ CPA PA			
. :		Firm/Company			
		10580 NW 27 ST			
		Address			
		DORAL FL 33172			
		City/ State and Zip Code			
	E-mail address: (to be	Y@ALMCPA.COM used for future annual report notification)			
For further inform	stion concerning this matte	er, please cail:			
****	NDY MARTINEZ	at (305) 559 3000			
;	of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a chec	k for the following amount	made payable to the Florida Department of State:			
S35 Filing Fee	☐ \$43.75 Filing Foc & Certificate of Status	Certified Copy (Additional copy is enclosed) \$32.50 Filing Fee			
Mailing Address Amendment Section		Street Address Amendment Section			
Division of	Corporations	Division of Corporations			
P.O. Box 6 Tallahasse	327 s, FL 32314	Clifton Building 2661 Executive Center Circle			
, - and an electrical (a)		Tallahussaa El 37301			

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September 2, 2011

FLORIDA DEPARTMENT OF STATE

MARTINEZ & ESPINOSA C.F.A., P.A. Division of Corporations 10580 NW 27 ST DORAL, FL 33172

SUBJECT: MARTINEZ & ESPINOSA C.P.A., P.A.

REF: PD2000013194

We have received your document for MARTINEZ & ESPINOSA C.P.A., P.A. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The conflict is P09000059851 / MARTINEZ AND COMPANY, C.F.A., P.A. Adding an S to cpa does not make the name different.

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) 245-6957.

Tracy L Lemieux Regulatory Specialist II FAX Aud. #: H11000215808 Letter Number: 611A00020503

P.O BOX 6327 - Tallahassee, Florida 32314

Articles of Amendment to Articles of Incorporation of

MARTINEZ AND ESPINOSA CPA PA

(Name of Corporation	as currently filed with the l	Morida :	Dept. o	(State)
		·		

P02000013194

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. MARTINEZ & CO. I name must be distinguishable and contain the distinguishable and contain the history, "Inc.," or Co., " or the name must contain the word "chartered," "proj	designation "Corp," "Inc," or	pany," or "incorpora "Co". A professional	
I. Enter new principal office address, if appl	licable:		
Principal office address MUST BE A STREE	TADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFIC	CE BOX)		
	· · · · · · · · · · · · · · · · · · ·		
. If amending the registered agent and/or re	raistered office address in Flor	ide enter the name of	rthu
new registered agent and/or the new regis	tered office address:	Mar, Salar inc name an	
Name of New Registered Agent:			71 3-7 a
-		· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	(Florida street address	וו	
-	(City)	Florida (Zip Code)	
ew Registered Agent's Signature, if changing	Registered Agent:		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ereby accept the appointment as registered as		ept the obligations of t	he postilan.
Sis	gnature of New Registered Agen	I, if changing	- 17e

Page 1 of 3

Hamending the Officers and/or Directors, enter the fittle 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) Title : Name Address Type of Action JEANNIE ESPINOSA ☐ Add 10580 NW 27 ST 2 Remove **DORAL FL 33172** □ Add ☐ Remove ☐ Add ☐ Remove E. If smending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. 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)

Page 2 of 3

	t(s) adoption: AUGUST 30 2 SEPTEMBER 1 2011	option is required)
Effective date if applicable:	(no more than 90 days after a	mourimont file data)
	(na more inar so auja ujier u	menument file descy
Adoption of Amendment(s)	(CHECK ONE)	
	ere adopted by the shareholders. are sufficient for approval.	The number of votes cast for the amendment(s
		through voting groups. The following statement to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/	were sufficient for approval
by COMMON SHA	REHOLDERS	Я
· · · · · · · · · · · · · · · · · · ·	(voting group)	
action was not required.		tors without shareholder action and shareholder without shareholder action and shareholder
	SUST 30 2011	! Un
scle		ficer - if directors or officers have not been he hands of a receiver, trustee, or other court y)
	ANDY	MARTINEZ
	(Typed or printed t	name of person signing)
	PRE	SIDENT
	(Title of person signing	3)

Page 3 of 3

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