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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: VERA PAIN	NT & BODY SHOP,INC	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBER: P03000035	430	
The enclosed Articles of Amendment and fee ar	re submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
	ERTO LEZCANO	
(Name o	f Contact Person)	
VERA PA	AINT & BODY SHOP,INC	
(Firr	m/ Company)	
	92 NW 54 ST	
(	(Address)	
	AMI,FL 33142 ate and Zip Code)	
For further information concerning this matter, p	•	
GILBERTO LEZCANO	at ( <u>305-</u> ) <u>634-761</u>	0
(Name of Contact Person)	(Area Code & Daytim	e Telephone Number)
Enclosed is a check for the following amount ma	ade payable to the Florida De	partment of State:
\$35 Filing Fee \$\times \$43.75 Filing Fee \$\times Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 C	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

VERA PAINT &	BODY SHOP, INC	
(Name of Corporation as currently	filed with the Florida Dept. of	
P03000	0035430	+
	of Corporation (if known)	•
Pursuant to the provisions of section 607.1006, FI following amendment(s) to its Articles of Incorporate		fit Corporation adopts the
A. If amending name, enter the new name of the	corporation:	
The new name must be distinguishable and of "incorporated" or the abbreviation "Corp.," "Inc "Co". A professional corporation name missociation," or the abbreviation "P.A."	c.," or Co.," or the designation	n "Corp," "Inc," or
B. Enter new principal office address, if applicab	ole:	
(Principal office address <u>MUST BE A STREET AL</u>		AAS A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>	PH 4: 05 FE. FLORID.
D. If amending the registered agent and/or registered new registered agent and/or the new registere  Name of New Registered Agent:		enter the name of the
New Registered Office Address:	(Florida street address)	
<del></del>	(Cir.)	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Relative I hereby accept the appointment as registered age position.		ecept the obligations of the
Signa	ture of New 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	ORLANDO PACHECO	3492 NW 54 ST MIAMI,FL 33142	☐ Add ☐ Remove
•			Add Remove
			☐ Add ☐ Remove
	h additional sheets, if necessary). (Be		
prov	n amendment provides for an exchang visions for implementing the amendm (if not applicable, indicate N/A)		

Th	ie date of each amendmen	t(s) adoption: <u>11/21/2008</u>
Effective date if applical		IMMEDIATE
		(no more than 90 days after amendment file date)
Ad	loption of Amendment(s)	(CHECK ONE)
☑		ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
		are approved by the shareholders through voting groups. The following statement and 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 100.00 %	
		(voting group)
	action was not required.	re adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder action and shareholder
	Dated_11/2	
	(By	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)
		GILBERTO LEZCANO
		(Typed or printed name of person signing)
		PRESIDENT
		(Title of person signing)