

PQ3000058114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

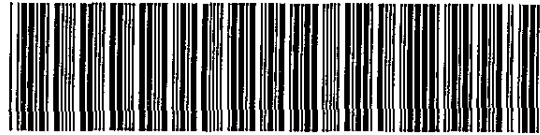
(Business Entity Name)

(Document Number)

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04 FEB -2 PM 1:54
STATE COURT OF FLORIDA
TALLAHASSEE, FLORIDA

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Amend/REC
MAD 2/6

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Amendment of Navigation Recovery, Inc.

DOCUMENT NUMBER: P03000058114

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

Please return all correspondence concerning this matter to the following:

Nuria Reina

(Name of Person)

Royalty Recovery, Inc.

(Name of Firm/ Company)

17620 Atlantic Blvd. #308

(Address)

Miami, FL 33160

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Nuria Reina

(Name of Person)

at (305) 416-6370

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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
409 E. Gaines Street
Tallahassee, FL 32399

Royalty Recovery, Inc.
17620 Atlantic Blvd. #308
Sunny Isles, FL 33160
305-692-5503

January 8, 2004

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

RE: Document Number: P03000058114

Gentlemen,

Attached please find an amendment request form for the above referenced. The changes we are requesting are as follows: The corporation name, principal and mailing address, the name of the registered agent, and officer/director of the corporation. I, Nuria Reina, accept the obligations of the position as the new registered agent.

Enclosed please find a check in the amount of \$43.75 for the filing fee and certificate of status.

Should you need additional information, please contact me at the address or phone number indicated above.

Thanking you in advance for your attention in this matter, I remain,

Sincerely,



Nuria Reina, President

Enclosure



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

January 20, 2004

NURIA REINA
ROYALTY RECOVERY, INC.
17620 ATLANTIC BLVD., #308
SUNNY ISLES, FL 33160

SUBJECT: NAVIGATION RECOVERY, INC.
Ref. Number: P03000058114

We have received your document for NAVIGATION RECOVERY, INC. and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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) 245-6882.

Maryanne Dickey
Document Specialist

Letter Number: 904A00003432

Articles of Amendment
to
Articles of Incorporation
of

Navigation Recovery, Inc.
(Name of corporation as currently filed with the Florida Dept. of State)

P03000058114
(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:

NEW CORPORATE NAME (if changing):

Royalty Recovery, Inc.
(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

1) New Mailing Address: 17620 Atlantic Blvd #308

Sunny Isles, FL 33160

2) New Registered Agent: Nuria Reina Remove: Yanko Reina

17620 Atlantic Blvd. #308 Sunny Isles, FL 33160

3) Officer/Director: New Nuria Reina Remove: Yanko Reina

17620 Atlantic Blvd. #308 Sunny Isles, FL 33160

Please admend according to the information provided

above. Thank you!

(Attach additional pages if necessary)

If an amendment provides for 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)

n/a

(continued)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

The date of each amendment(s) adoption: 1/1/04

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided 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)"

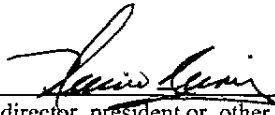
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation.

Signed this 28 day of January, 2004.

Signature


(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Nuria Refina

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE: \$35