

PD3000093107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

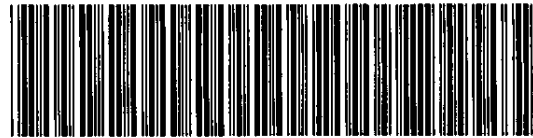
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200260209722

06/19/14--01006--019 \*\*10.00

05/20/14--01002--019 \*\*25.00

FILED  
SECRETARY OF STATE  
DIVISION OF OPERATIONS  
14 JUL -3 PM 3:21

Amend  
@ 7/3/14

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: CSL OF AMERICA, INC.  
DOCUMENT NUMBER: P03000093107

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

Please return all correspondence concerning this matter to the following:

Stephanie Bispo  
Name of Contact Person  
CSL OF AMERICA, INC.  
Firm/ Company  
1900 S. Orange Blossom Trail  
Address  
Orlando, FL 32805  
City/ State and Zip Code  
stephanie@cslautocenter.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephanie Bispo at ( 407 ) 637-0442  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>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

June 19, 2014

STEPHANIE BISPO  
CSL OF AMERICA, INC.  
1900 S. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32805

SUBJECT: CSL OF AMERICA, INC.  
Ref. Number: P03000093107

We have received your document for CSL OF AMERICA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please check only 1(one) box.

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) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 314A00013302



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 18, 2014

STEPHANIE BISPO  
CSL OF AMERICA INC  
1900 S. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32805

SUBJECT: CSL OF AMERICA, INC.  
Ref. Number: P03000093107

We have received your document for CSL OF AMERICA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must have original signatures.

You failed to sign the document.

*Done* ✓

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) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 214A00013171

RECEIVED  
14 JUL -3 AM 10:13  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
14 JUN 16 PM 12:57  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

June 3, 2014

STEPHANIE BISPO  
CSL OF AMERICA, INC.  
1900 S. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32805

SUBJECT: CSL OF AMERICA, INC.  
Ref. Number: P03000093107

We have received your document for CSL OF AMERICA, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The fee to file your document is \$35.

There is a balance due of \$10.00.

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) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 914A00011936

Articles of Amendment  
to  
Articles of Incorporation  
of

CSL OF AMERICA, INC.

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

P03000093107

(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. If amending name, enter the new name of the corporation:**

n/a

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

**B. Enter new principal office address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

n/a

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

n/a

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent

Mrs. Stephanie Bispo  
1900 S. Orange Blossom Trail  
(Florida street address)

New Registered Office Address:

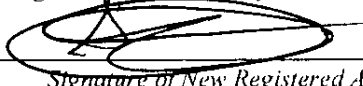
Orlando  
(City)

Florida 32805  
(Zip Code)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 JUL -3 PM 3:21

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature 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)*

*Please note the officer/director title by the first letter of the office title:*

*P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.*

*Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.*

**Example:**

X Change                      PT      John Doe

X Remove                    V      Mike Jones

X Add                        SV      Sally Smith

Type of Action  
(Check One)

Title

Name

Address

1) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____

(Attach additional sheets, if necessary). (Be specific)

(if not applicable, indicate N/A)



The date of each amendment(s) adoption: 03.01.14, if other than the date this document was signed.

Effective date if applicable: 03.01.14  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted 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

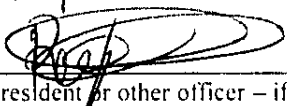
by \_\_\_\_\_  
(voting group)

☐ 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.

Dated 6.10.14

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)

Mr. Romulo C. Bispo

(Typed or printed name of person signing)

Title VP

(Title of person signing)