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SELECTION OF A SELECT

Amend

SEP 15 7017
LALBRITTON

COVER LETTER

TO: Amendment Section

1,

✓ Division of Corporations		
NAME OF CORPORATION: BLAJO	hi & Cerchi Service, Ivc.	
DOCUMENT NUMBER: P \$ 4 \$	\$\$\$ 13 \$ 869	
The enclosed Articles of Amendment and fee	 Pre submitted for filing.	
Please return all correspondence concerning th	is matter to the following:	
٠ ٨ ١ ١		
Matte	o Wegno	
	Name of Contact Person	
Bjarchi	& Ceachi Service Inc.	
· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
13181 N	w 43nd Ave	
Hism	Address FL 3305V	
	City/ State and Zip Code	
matteonegro	be used for future annual report notification)	
E-mail addiess: (to	be used for future annual report notification)	
For further information concerning this matter,	llesse cells	
to further information concerning this matter.		
Matter Negro	at (305) 356-6730	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount n	nade payable to the Florida Department of State:	
\$35 Filing Fee S43.75 Filing Fee		
Certificate of Star	11	
	(Additional copy is Certified Copy enclosed) (Additional Copy	
	is enclosed)	
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation of

Branchi and	Cachi Scurice	Inc.	
(Name of Co	orporation as currently filed with	the Florida Dept. of State)	
P\$4	ØØØØ 13 Ø 869		
	(Document Number of Corporation	on (if known)	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	Florida Statutes, this <i>Floridu Pro</i>	ofit Corporation adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new name	of the corporation:		
			The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	n "Corp," "Inc," or "Co". A pr		the abbreviation
B. Enter new principal office address, if ap			
(Principal office address <u>MUST BE A STRE</u> C. <u>Enter new mailing address, if applicable</u>			
(Mailing address MAY BE A POST OFF			
D. If amending the registered agent and/or new registered agent and/or the new reg		ida, enter the name of the	SEP III
new registered agent and/or the new reg			22
Name of New Registered Agent	MATTEO NEGRO		<u> </u>
	13181 NW 43 AV (Florida street address)		\$15 F. I
New Registered Office Address:	Misnu,	, Florida	37054
New Registered Agent's Signature, if chang I hereby accept the appointment as registered			(Zip Code) sition.

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	<u>PT</u> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>: Jones</u>	
X Add	<u>SV</u> Sally	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>CHOB</u>	Alfredo BIANCHI	
Add Remove			
2) Change		BRUZZO ANDREA	
Add Remove 3) Change	T	FRANCESCO BIANCHI	
Add Remove			
4) Change	<u> </u>	VAVENIO, GIANLUCA	
Remove 5) Change	PCFT	ALFREDO BIANCHI	
Add Remove			
6) Change Add Remove			

. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
(Titaen adamonar sizeta, y ricessary).	
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If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	<u> </u>
	
	-
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The date of each amendment(s) adoption: _	g	111-	7		_, if other than the
date this document was signed.	<u> </u>	1 1	·		, if other than the
Effective date if applicable:	<u> </u>		<u>.</u>		
	(no more tha	ın 90 days	after amendment	file date)	
Note: If the date inserted in this block does document's effective date on the Department of			tatutory filing requ	uirements, this date will	not be listed as the
Adoption of Amendment(s) (C	HECK ONE)				
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		The numb	er of votes cast for	the amendment(s)	
☐ The amendment(s) was/were approved by t must be separately provided for each votin	 he shareholders g group entitled 	through vo to vote se	oting groups. The parately on the an	following statement nendment(s):	
"The number of votes cast for the am	II	were suffi	cient for approval		
by	oting group)				
(v	oling group) 				
☐ The amendment(s) was/were adopted by th action was not required.	board of direct	ors withou	ut shareholder acti	on and shareholder	
☐ The amendment(s) was/were adopted by th action was not required.	incorporators/	vithout sha	areholder action ar	nd shareholder	
DatedS	<u>in </u>				
Signature	A	J_			<u>_</u>
	corporator – if ir	the hands	directors or office s of a receiver, trus	ers have not been stee, or other court	
appointed fiducia	ry by that fiducia	•			
		MATE	20 NEGLO		
	(Typed or print	ed name o	of person signing)		
_		<u>Ih</u>	tector		
	(Ті	tle of pers	on signing)		