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COVER LETTER

1.

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: ALL FLORIDA G	ROUP CORP			
DOCUMENT NUM	P05000020269				
The enclosed Articles	of Amendment and fee are suf	bmitted for filing.			
Please return all corre	spondence concerning this mat	ter to the following:			
	DENISE L VALDERRAMA				
		Name of Contact Persor	1		
	ALL FLORIDA GROUP CORP				
		Firm/ Company			
	19319 SW 54th STREET				
		Address			
	MIRAMAR, FL 33029				
		City/ State and Zip Code			
vde	rrama13@aol.com		19 0		
	E-mail address: (to be us	sed for future annual report	notification)		
			<u> </u>		
For further information	on concerning this matter, pleas	se call:			
DENISE L VALDER	RRAMA	at (587-3828		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	artment of State:		
■ \$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)		
Ma	illing Address		Address		
Amendment Section		Amendment Section Division of Corporations			
Div	rision of Cornorations	DIVISIC	DI OT COMPORATIONS		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ALL FLORIDA GROUP CORP

(Manie of Corporation as c	currently filed with the Florida Dept. of Stat	<u>e</u>)
P05000020269		
(Document Nu	umber of Corporation (if known)	<u> </u>
arsuant to the provisions of section 607.1006, Florida Statut Articles of Incorporation:	ees, this Florida Profit Corporation adopts the	following amendment(
If amending name, enter the new name of the corporate	tion:	
me must be distinguishable and contain the word "cor	"	The new
ome mast be distinguishable and contain the word "corp.," "Inc.," or Co.," or the designation "Corp.," "Inc ord "chartered," "professional association," or the abbrev	e." or "Co". A professional corporation nam	r the appreviation ie must contain the
Enter new principal office address, if applicable:	19319 SW 54th STREET	
rincipal office address <u>MUST BE A STREET ADDRESS</u>) - MIRAMAR, FL 33029	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	" 19319 SW.54th STREET	19 C
, ,	ा । आ" MIRAMAR; FL 33029	
		- <u>8</u> 73
If amending the registered agent and/or registered offi	ce address in Florida, enter the name of the	
new registered agent and/or the new registered office a		: A
Name of New Registered Agent		
· · · · · · · · · · · · · · · · · · ·		
(Fle	orida street address)	
New Registered Office Address:	, Florida, Florida_	(Zip Code)

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:	,	ny omin, sy us an Add.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change	D	DENISE L VALDERRAMA	19319 SW 54th STREET
Add			MIRAMAR, FL 33029
Remove			
2) Change	SD	LAZARO VALDERRAMA	19319 SW 54th STREET
Add ~			MIRAMAR, FL 33029
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
(i) Change			
Add			
Remove			

If amending or adding additional Arti- Attach additional sheets, if necessary).	(Be specific)	
		<u> </u>
		·
		
<u> </u>		
		
	·	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,	
provisions for implementing the amen (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
···		

date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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 10-22-2019	
Signature Winix. L. Valdename	
(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)	
DENISE L VALDERRAMA	•
(Typed or printed name of person signing)	
DIRECTOR President	
(Title of person signing)	