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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF ÇORP	ORATION:	C.F.S. UNION, INC.	
DOCUMENT NU	MBER:	P05000047311	
The enclosed Artica	les of Amendment and fee a	re submitted for filing.	
Please return all co	rrespondence concerning thi	s matter to the following:	
_	S	SALVADOR DIPP	
	· iv	Name of Contact Person	
_	MLP FINANCIAL GROUP, INC.		
	Firm/ Company		
-	4005 NW 114th AVE., SUITE 5		
		Address	
-	DORAL, FL 33178		·····
		ity/ State and Zip Code	
	saldipp@pre E-mail address: (to be use	emiumtaxservices.com d for future annual report notification)	
For further informa	ation concerning this matter,	please call:	
SA	ALVADOR DIPP	at (305) 40 Area Code & Daytime Tele	06-3858
Name	of Contact Person	Area Code & Daytime Tele	ephone Number
Enclosed is a check	k for the following amount n	nade payable to the Florida Depart	ment of State:
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ac Amendmen Division of P.O. Box 63 Tallahassee	t Section Corporations 327	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	e

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

C.F	.S. UNION, INC	t. of State)
	irrently filed with the Florida Dep	t. of State)
P	05000047311	
	Number of Corporation (if known)	
Pursuant to the provisions of section 607.3 amendment(s) to its Articles of Incorporation		Profit Corporation adopts the following
A. If amending name, enter the new nam	e of the corporation:	
CJK PROFE	SSIONAL SERVICES, INC	The new
name must be distinguishable and conta abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "	the designation "Corp," "Inc," or	"Co". A professional corporation
B. Enter new principal office address, if a (Principal office address MUST BE A STR		
		
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
D. If amending the registered agent and/ new registered agent and/or the new r		ida, enter the name of the
Name of New Registered Agent:	SALVADOR DIPP	
	4005 NW 114th AVE., SUI	TE 5
New Registered Office Address:	(Florida street addres	
	DORAL, FL 33178	. Florida 33178
	(City)	(Zip Code)
New Registered Agent's Signature, if cha	nging Registered Agent:	
I hereby accept the appointment as registere		cept the obligations of the position.
	de les	
	Signature of New Registered Ager	at, 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
VPD	JAQUELINA KOPYTKIN	20381 NE 30 AVE BLDG 7-216 AVENTURA, FL 33180	✓ Add ☐ Remove
			☐ Add ☐ Remove
			Add Remove
(attach addi	itional sheets, if necessary). (Be spe	сіліс)	
<u>provision</u> :	ndment provides for an exchange, resident provides for an exchange, resident indicate N/A)		

The date of each amendmen	t(s) adoption: <u>03</u>	//01/2010
Effective date if applicable:	03/01/2010	(date of adoption is required)
, . · · <u></u>	(no more than 9	0 days after amendment file date)
Adoption of Amendment(s)	(CH	ECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes cast for the amendment(s) approval.
		e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of yours	case for the amen	dment(s) was/were sufficient for approval
by My	tell	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the	board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the	incorporators without shareholder action and shareholder
Dated_03/0)1/2010	
Signature _	Ma	x lu
(B _y		lent or other officer - if directors or officers have not been
	ected, by an incompointed fiduciary b	porator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		CLAUDIO SZMUC
	(Ty	ped or printed name of person signing)
		PRESIDENT
	(Title of	f person signing)