## P05000 101581

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)
(Address)  (City/State/Zip/Phone #)  PICK-UP  WAIT  MAIL
(Address)  (City/State/Zip/Phone #)  PICK-UP  WAIT  MAIL
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(
(Document Number)
(Socialism (Millison)
Optification of Outro
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1
İ
1





900061727549

12/02/05--01006--020 \*\*35.00

05 DEC -2 PM 12: 32
SECRETARY OF STATE
ALL AHASSEE, FLORIDA

ANEXE &

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF C	ORPORATION: PRIMA'S ST	ORE II, INC.	<del></del>
DOCUMENT	NUMBER: P05000101581		·
The enclosed	Articles of Amendment and fee ar	e submitted for filing.	
Please return	all correspondence concerning this	s matter to the following:	
	LILIANA Y. RIVERA		
	(Name o	f Contact Person)	
	PRIMA'S STORE II, INC.		
	(Fire	m/ Company)	
	6980 S.R. 60 W		
	1	(Address)	<del></del>
	MULBERRY, FL 33860		
	(City/ St	ate and Zip Code)	-
For further in	formation concerning this matter,	please call:	
LILIANA		at ( 813 ) 650-8478	
	(Name of Contact Person)	(Area Code & Daytime	lelephone Number)
Enclosed is a	check for the following amount:		
☑ \$35 Filing Fe	e \$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)
Amen Divisi P.O. B	ng Address dment Section on of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	cle

## Articles of Amendment to Articles of Incorporation of

DDIMANO	OTODE	11	INIO
PRIMA'S	SIUKE	11	HAG.

(Na...e of prporation as currently filed with the Florida Dept. of State)

P05000101581

(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):

(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Article II - New Mailing Address - 6980 S.R. 60 W - Mulberry, FL 33860
Article VII - Deleted - Amjad Hijaz - VP
(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
Transfer shares from Amjad Hijaz to Liliana Rivera ( 100%).

(continued)

The date of each amendment(s) adoption: 11/29/05
Effective date if applicable: 11/29/05
(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.
Signature  (By a director, president or other officer if directors or officers have not been selected, by an incorporator - it is the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Liliana Y. Rivera
(Typed or printed name of person signing)
President
(Title of person signing)

FILING FEE: \$35