

PD5000102622

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

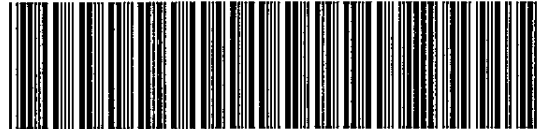
(Business Entity Name)

(Document Number)

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08/19/05--01047--001 **105.00

CLERK OF COURT
ALACHUA COUNTY, FLORIDA

05 SEP 28 AM 9:25

FILED

Rs of 23 for
Amend

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LOXBOSH PROPERTIES CORPORATION

DOCUMENT NUMBER: P05000102622

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

Please return all correspondence concerning this matter to the following:

VICTOR SEPULVEDA ✓
(Name of Contact Person)

RAGSZRITCHES INVESTMENT GROUP INC
(Firm/ Company)

18149 SW 148TH AVE RI
(Address)

MIAMI, FL 33187
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 30, 2005

VICTOR SEPULVEDA
RAGS2RITCHES INVESTMENT GROUP INC
18149 SW 148TH AVE RD
MIAMI, FL 33187

SUBJECT: LOXBOSH PROPERTIES CORPORATION
Ref. Number: P05000102622

We have received your document for LOXBOSH PROPERTIES CORPORATION and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must also contain the address of the registered agent which must be at a Florida street address.

Please also clarify if you are signing of behalf the entity stated as the new registered agent.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 245-6957.

Pamela Smith
Document Specialist

Letter Number: 105A00054647



September 24th, 2005

Pamela Smith
Document Specialist
FLORIDA DEPARTMENT OF STATE
Division of Corporations
PO BOX 6327
Tallahassee, FL 32314

RE: P05000102622/ Letter Number: 105A00054647

Dear Ms. Smith,

I am in receipt of your letter dated September 17th. Please be advised that the address for the proposed registered agent "Loxbosh Investment Group" and for the Corporation in question "Loxbosh Properties Corporation" is as follows:

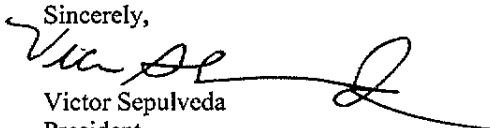
Physical Address: 18149 SW 148th Ave Rd
Miami, FL 33187-1882

Mailing Address: PO Box 770760
Miami, FL 33177

Also, I am the president to both of these organizations and I am signing on behalf of both entities as it relates to this change request. If you have any questions regarding this request, I can be reached day or night at my direct number (305) 219-2507 or feel free to send me an e-mail at victor@loxbosh.com

Thank you for your assistance and collaboration on this issue.

Sincerely,


Victor Sepulveda
President

P.O. Box 770760
Miami, FL 33177
Phone: 800-676-7010
Fax: 786-293-8844
Email: info@loxbosh.com

www.loxboshproperties.com

Articles of Amendment
to
Articles of Incorporation
of

FILED

05 SEP 28 AM 9:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LOXBOSH PROPERTIES CORPORATION

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

P05000102622

(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):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(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)**

NEW REGISTERED AGENT FOR THIS FIRM SHOULD BE
(LOXBOSH INVESTMENT GROUP CORPORATION.)
18149 SW 148TH AVE RD
MIAMI FL 33187

PO BOX 770760

MIAMI FL 33177

(NOTE, I AM SIGNING ON BEHALF OF BOTH FIRMS ON THIS FORM)

(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)

(continued)

The date of each amendment(s) adoption: 8-16-05

Effective date if applicable: 8-16-05
(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.

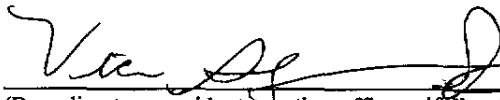
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"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.

Signed this 16 day of AUGUST, 2005.

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)

VICTOR SEPULVEDA
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

FILING FEE: \$35