

**Division of Corporations** Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0380

Account Name : TAXPLACE CORP. Account Number : I20050000203

Phone

: (772)460-1000

Fax Number

: (772)460-7973

## COR AMND/RESTATE/CORRECT OR O/D RESIGN

VIP KITCHEN CABINETS, CORP.

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: VIP KITCH	HEN CABINETS, COR	Р.
DOCUMENT NUM	MBER: P05000123601		
The enclosed Articl	es of Amendment and fee ar	e submitted for filing.	
Please return all cor	respondence concerning this	s matter to the following:	· .
		DIO RIBEIRO	
	(Name o	of Contact Person)	
	ŢAX	PLACE CORP	
. ,	(Fir	m/ Company)	·
	2721 S.	US 1 SUITE#9	
		(Address)	
	Fort P	ierce, FL 34982	
	(City/ Si	tate and Zip Code)	
For further informat	tion concerning this matter,	please call:	
	AUDIO RIBEIRO of Contact Person)	at ( 772 ) 460-1000  (Area Code & Daytime Telephone Number)	
Enclosed is a check	for the following amount:		
\$35 Filing Fee   □ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ad Amendment Division of- P.O. Box 63 Tallahassee.	Section Corporations 27	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C	

Tallahassee. FL- 32301

## (((H06000292920 3))) Articles of Amendment Articles of Incorporation

of		90
VIP KITCHEN CABINETS, CORP.	>5. =6.	6 DE
(Name of corporation as currently filed with the Florida Dept. of State)	HASS	C 12
P05000123601	F ~	3
(Document number of corporation (if known)	S	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit adopts the following amendment(s) to its Articles of Incorporation:	SPA PAPO P	ration
NEW CORPORATE NAME (if changing):		
(Must contain the word "corporation," "company", "or incorporated" or the abbreviation "Corp.," "Inc (A professional corporation must contain the word "chartered", "professional association," or the abbr	reviatio	n "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	le Nui	mber(s)
ARTICLE VII - THE NEW OFFICERS AND DIRECTORS OF THE CORPORATION ARE:		•
Name: Artur Silva		
Address: 1026 Sw Charcoal Ave., Port St Lucie, FL 34953		
Title: President-Director		_ ; ¥
Shares: 34%		·
Name: Ronaldo Souza Gloria		- <del></del>
Address:1666 Se Ridgewood St., Port St Lucie, FL 34952		
Title: Director		
Shares: 33%		
Name: Geraldo Ricardo Miranda		
Address: 1665 Se Mansfield St., Port St Lucie, FL 34952		7 1 D 2 3 D4
Title: Director		
Shares: 33%		
(Attach additional pages if necessary)		
It an amendment provides for exchange, reclassification, or cancellation of issued share for implementing the amendment if not contained in the amendment itself: (if not applicable	s, prove, indica	visions ate N/A)
· · · · · · · · · · · · · · · · · · ·		

(continued)

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The date of each amendment(s) adoption: 12/5/06
Effective date if applicable: 12/5/06
(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 rifdirectors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed figureary by that fiduciary)
Jose M Rodrigues  (Typed or printed name of person signing)
President/Director (Title of person signing)

FILING FEE: \$35