# P05000/35038

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09/14/10--01012--025 \*\*43.75



Amend.
9-16-10
Dc

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION:	PERDOMO BODY SHO	PINC
DOCUMENT NUM	IBER:	P05000135038	3
The enclosed Article	s of Amendment and fee a	are submitted for filing.	
Please return all corr	espondence concerning th	is matter to the following:	
		CARDO L. ORTEGA	
	1	Name of Contact Person	
_	<del></del>	Firm/ Company	
	7870 W FLAGLER ST		
		Address	
	C	MIAMI, FL 33144 City/ State and Zip Code	<u>_</u>
-	FASTAGENCYS E-mail address: (to be use	SERVICES@YAHOO.COM ed for future annual report notification)	
For further informati	on concerning this matter,	please call:	
RICAF	RDO L ORTEGA	at ( <u>305</u> ) Area Code & Daytime To	559-6822
Name of	Contact Person	Area Code & Daytime To	elephone Number
Enclosed is a check f	or the following amount n	nade payable to the Florida Depa	ertment 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)
Mailing Add Amendment S Division of C	Section orporations	Street Address Amendment Section Division of Corporations	
P.O. Box 632 Tallahassee, 1		Clifton Building 2661 Executive Center Circ	nle.

Tallahassee, FL 32301

#### **Articles of Amendment** to Articles of Incorporation of

#### PERDOMO BODY SHOP INC.

(Name of Corporation as curre	ntly filed with the Florida	Dept. of State)	To the Con
P050	000135038		
(Document Num	ber of Corporation (if know	n)	( % T
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	, Florida Statutes, this <i>Flor</i>	rida Profit Corporation a	dopts the follo
A. If amending name, enter the new name of	the corporation:		
			The new
name must be distinguishable and contain to abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "prof	designation "Corp," "Inc,'	' or "Co". A professiona	
B. Enter new principal office address, if appl			<del></del>
(Principal office address <u>MUST BE A STREE</u> T	T ADDRESS )		
	<del></del> -	All all and a second a second and a second a	
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFIC</u>	<u></u>		<del></del>
D. If amending the registered agent and/or re	egistered office address in	Florida, enter the name o	f the
new registered agent and/or the new regis	tered office address:		
Name of New Registered Agent:			
New Registered Office Address:	(Florida street ade	dress)	
		IST and do	
-	(City)	, Florida (Zip Code)	
	, ,,	, ,	
New Registered Agent's Signature, if changin I hereby accept the appointment as registered as		d accept the obligations of	the position
zo, ucocpi ine appointment us registereu ug	som. Tum jumma mini und	t accept the obligations of	
	imatum of Non-Parinten-1	Annat if above the	
Si	gnature of New Registered 2	Agent, 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
<u>P</u>	MARIELA URBINA	1901 NW 36 ST MIAMI, FL 33142	
<u>S</u>	EDWIN M. CRUZ	1901 NW 36 ST MIAMI FL 33142	
			Add   Remove
(attach a	dditional sheets, if necessary). (Be spe	cific)	
<u>provisi</u>	nendment provides for an exchange, reons for implementing the amendment in applicable, indicate N/A)	eclassification, or cancellation f not contained in the amend	of issued shares, ment itself:
	3/2 -		

## 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)

Titlé	Name	Address	Type of Action
<u>P</u>	JAVIER GUTIERREZ	12663 NW 8 WAY MIAMI FL 33182	☐ Add ☐ Remove
<u>VP</u>	NOEL VIGO	1605 SW 19 LN CAPE CORAL FL 33991	☐ Add ☐ Remove
<u>s</u>	RAMON A GARCIA	12663 NW 8 WAY MIAMI FL 33182	☐ Add ☑ Remove
(anach adan	(ional sheets, if necessary). (Be specific	)	
provisions	ndment provides for an exchange, reclated for implementing the amendment if no applicable, indicate N/A)		

The date of each amendment(	s) adoption: 09/09/10
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	ast for the amendment(s) was/were sufficient for approval
by	.,,
•	(voting group)
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated_SEP	ΓΕΜ <b>β</b> ER 9 2010
Signature	a.
selec	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	RAMON A GARCIA
	(Typed or printed name of person signing)
	SECRETARY
	(Title of person signing)