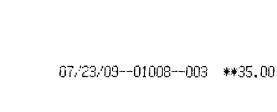
# P06000109441

(Re	equestor's Name)
(Ad	Idress)
(Ad	ldress)
(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	isiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	Office Use Only



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ALLAMASEN LON

SECRETARY OF STATE

## Articles of Amendment to Articles of Incorporation of

	ILED
ווול ציייי	Δ.,
	<3 AM 8: 43 RY OF STATE SEE, FLORIDA

#### J&C ENTERPRISES DUO CORP

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

P06000109441

(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:

ame must be distinguishable and cont bbreviation "Corp.," "Inc.," or Co.," o ame must contain the word "chartered,"	r the designation "Corp," "Inc,"	or "Co". A professional corporat
. Enter new principal office address, if Principal office address <u>MUST BE A ST</u>		
Enter new mailing address, if applic (Mailing address MAY BE A POST O		***
	•	
. If amending the registered agent and new registered agent and/or the new		Florida, enter the name of the
		Florida, enter the name of the
new registered agent and/or the new  Name of New Registered Agent:	registered office address:	
new registered agent and/or the new		
new registered agent and/or the new  Name of New Registered Agent:	registered office address:  (Florida street add	dress), Florida
<u>Name of New Registered Agent:</u>	registered office address:  (Florida street add	dress)

### 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)

Title	<u>Name</u>	Address	Type of Action
<u>P</u> .	CARLOS I RUIZ	11833 HICKORYNUT DRIVE TAMPA,FL 33625	_ ☐ Add _ ☑ Remove
<u>P</u>	CARLOS F RUIZ	11833 HICKORYNUT DRIVE TAMPA,FL 33625	_ ☑ Add _ □ Remove
			_
	ing or adding additional Articles, enter ditional sheets, if necessary). (Be spec		
<u>provisio</u>	nendment provides for an exchange, rendment provides for an exchange, rendered in the samendment is applicable, indicate N/A)		

The date of each amendmen	t(s) adoption: 07-22-09
Effective date if applicable:	07-22-09 (date of adoption is required)
•	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated 07-	209 W 2
(By	a director, president or other officer - if directors or officers have not been
	cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
арр	ionned fiduciary by that fiduciary)
	CARLOS I RUIZ
	(Typed or printed name of person signing)
	( - 4 1
	PRESIDENT
	(Title of person signing)

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORI	PORATION:	J&C ENTERPRISES DUO	CORP		
DOCUMENT NU	MBER:	P06000109441			
The enclosed Artic	eles of Amendment and fee	are submitted for filing.			
Please return all co	orrespondence concerning th	nis matter to the following:			
CARLOS I RUIZ					
	ľ	Name of Contact Person			
Firm/ Company					
11833 HICKORYNUT DRIVE					
Address					
	TAMPA EL 22625				
TAMPA,FL 33625  City/ State and Zip Code					
	carlosi	iruiz@yahoo.com ed for future annual report notification)			
	E-mail address: (to be use	ed for future annual report notification)			
For further informa	ation concerning this matter,	, please call:			
	ARLOS I RUIZ	at ( 323 ) 4	59-8728		
Name	of Contact Person	Area Code & Daytime Tel	ephone Number		
Enclosed is a check	c for the following amount r	nade payable to the Florida Depar	tment of State:		
	☐ \$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 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 Circl	e		

Tallahassee, FL 32301