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COVER LETTER

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•	1	COVER LETTER			
TO: Amendment Secti	an		्री . a		
Division of Corpo			5		
NAME OF CORPOR	ATION: FORTE	DISTRIBUTION.	INC.		
	ER:P0600014	•			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	STE	PHEN H. ARTMAN			
		Name of Contact Person			
•	STE	PHEN H. ARTMAN	, P.A.		
·		Firm/ Company			
	925	South Florida	Avenue		
		Address			
	Lak	eland, FL 338(
		City/ State and Zip Code	;		
	steve@art	nanlawoffice.co	om .		
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	n concerning this matter, pleas	e call:			
7 or running information	, econocioning units initiation, pro-				
	H. Artman	at (<u>863</u>) 688-5252		
Name o	of Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	payable to the Florida Depa	rtment of State:		
\$35 Filing Fee	□\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee		
•	Certificate of Status	Certified Copy (Additional copy is	Certificate of Status Certified Copy		
		enclosed)	(Additional Copy		
			is enclosed)		
	ling Address endment Section		Address		
	sion of Corporations	Amendment Section Division of Corporations			
P.O.	Box 6327	Clifton	Clifton Building		
Talla	ahassee, FL 32314	2661 E	xecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

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	Articles of Ame	ndment	·.	
e e	to	.•		The stand
	Articles of Incor	poration		Ċ.
				ري.
(Name of Corporation as curr	TE DISTRIBUTION THE Flore Control of the Flore Cont	ON, INC.	 	
	***	Ma Dept. of State		
P06000°	1 4 9 6 1 6 mber of Corporation (if k	noum)		
(Document Nui	niber of Corporation (if ki	nown)		
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Flo	orida Profit Corporation add	pts the following	g amendment(s) to
A. If amending name, enter the new name o	f the corporation:			
	N/A			_The new
name must be distinguishable and contain to "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "Co	". A professional corporati	ated" or the al ion name must c	obreviation contain the
B. Enter new principal office address, if app	olicable:	N/A		
(Principal office address MUST BE A STREE				•
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI	<u>:</u> 'CE BOX')	N/A		
D. If amending the registered agent and/or in new registered agent and/or the new registered.		s in Florida, enter the name	of the	
new registered agent and/or the new regi				
Name of New Registered Agent	N/A			
	(Florida street	address)		
New Registered Office Address:		, Florida		
	(City)		(Zip Code)	•
	•			
New Registered Agent's Signature, if changi I hereby accept the appointment as registered a		h and accept the obligations	of the position	
t nevery accept the appointment as registered to		. and accept the conguitons	oj ine posmon.	
	N/A			

Signature of New Registered 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, RF as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe		4
X Remove	<u>V</u>	Mike Jones	· · · · · · · · · · · · · · · · · · ·	
X Add	<u>sv</u>	Sally Smith	Address	?
Type of Action (Check One)	<u>Title</u>	Name	Address	ر. ت
1) Change	_Р	Glenda J. Padro	1511 W. Clinton St	•
Add X Remove			Tampa, FL 33604	
2) Change	<u>P</u>	Romulo A. Rincon	31410 Shaker Circl	e
X Add			Wesley Chapel,	
Remove			FL 33543	
3) Change	VP	Eden M. Rincon	31410 Shaker Circl	e
X Add			Wesley Chapel,	
Remove			FL 33543	
4) Change	_S	Eden M.Rincon	_31410_Shaker_Circle	e
X Add			Wesley Chapel,	
Remove			FL 33543	
5) Change	<u>T</u>	Romulo A. Rincon	31410 Shaker Circl	e
X Add			Wesley Chapel,	
Remove			FL 33543	
6) Change				
Add				
Remove				

All Tools of the second of the E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) N/A F. If an amendment provides for an 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) N/A

The date of each amendment(s) adoption:date this document was signed.	September	5, 2014	, if ot	her than the
Effective date if applicable:	September	5, 2014		
	(no more than 90 days a		date)	
			彩 言	
Adoption of Amendment(s) (CHE	CK ONE)		date)	A STATE OF THE STA
The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for app	areholders. The number proval.	of votes cast for the	مشر دید. دید.	
The amendment(s) was/were approved by the s must be separately provided for each voting ga	hareholders through vot roup entitled to vote sept	ing groups. The foll arately on the amen	owing statement Iment(s):	ى ئ
"The number of votes cast for the amend	ment(s) was/were suffici	ent for approval	Ãø.	
by				
(votin	g group)			
The amendment(s) was/were adopted by the boaction was not required.	ard of directors without	shareholder action a	nd shareholder	
The amendment(s) was/were adopted by the in- action was not required.	corporators without shar	eholder action and s	hareholder	
Dated	(
Signature				
	ent or other officer – if d			
	orator - if in the hands	of a receiver, trustee	, or other court	
appointed fiduciary b	y that fiduciary)			
RC	MULO RIA	4CON		
	(Typed or printed na	ame of person signir	g)	
	PRESIDENT	Τ		
	(Title of per	rson signing)		