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SECRETARY OF STATE
AND ASSET FOR BE

Amens C.COULLIETTE

AUG 19 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION: PRONTO C	DENERAL Services	
DOCUMENT NU	MBER: <u>02</u>	·	
The enclosed Artic	eles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning this	s matter to the following:	
	Cesar G	TO PERALTA arme of Contact Person	
	N	ame of Contact Person	
	Provio 65	WELL SERVICES Firm/ Company	
		Firm/ Company	
	8162 Coursey 1	Nd. W. 103	
	,	Address	
	Far MyENS, FO.	337/9 ity/ State and Zip Code	
•	Çi	ty/ State and Zip Code	
	CESAR DENAITA 23	REDYAND AND	
	E-mail address: (to be used	39 DYAHW. Owy I for future annual report notification)	
For further informa	tion concerning this matter,	please call:	,
CE5,	ar remm	at (561) 60/·1	210
Name	of Contact Person	Area Code & Daytime Tele	ephone Number
Enclosed is a check	for the following amount m	ade payable to the Florida Depart	ment of State:
□ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 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		Street Address Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 63		Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301	:

Articles of Amendment to Articles of Incorporation of

PRONTO GENERAL	Sovices		
(Name of Corporation as currently f	iled with the Florida Dept. o	of State)	
P07000011105			
(Document Number of	f Corporation (if known)		
Pursuant to the provisions of section 607.1006, Floramendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Pr</i>	rofit Corporation ado	pts the following
A. If amending name, enter the new name of the c	orporation: N/A		
			The new
name must be distinguishable and contain the we abbreviation "Corp.," "Inc.," or Co.," or the design name must contain the word "chartered," "profession	nation "Corp," "Inc," or "C	o". A professional c	ed" or the corporation
B. Enter new principal office address, if applicable	e: N/A	,	_
(Principal office address MUST BE A STREET AD)		ĪĀ	-
)9 A
		<u> </u>	is T
C. Enter new mailing address, if applicable:	Α.		7
(Mailing address MAY BE A POST OFFICE BO		<u></u>	
		8	- (*varing
			05
D. If amending the registered agent and/or registe	red office address in Florids	َ	the
new registered agent and/or the new registered	office address: N/A	i, circor the manie or	in the second
Name of New Registered Agent:			
Nume of New Registered Agent.			
New Registered Office Address:	(Florida street address)		
	······································	, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Re- I hereby accept the appointment as registered agent.		ot the obligations of th	e position.
, waste afferminen an cognition and	j	and	- Ł
Signatu	re of New Registered Agent. i	if changing	

f amending the Officers and/or Directors, enter the title and name of each officer/director being emoved and title, name, and address of each Officer and/or Director being added:			
Attach ad	ditional sheets, if necessary)		,,,,
<u>`itle</u>	Name	Address	Type of Action
			□ Add
<u> </u>			☐ Remove
		 	-
			D Add
			_ _
			□ Add
			Remove
			<u> </u>
If ama	nding or adding additional Articles,	enter change(s) here: 3//4	
	additional sheets, if necessary). (Be		
			
			
'. Ifanı	nmendment provides for an exchang	e, reclassification, or cancellation of i	ssued shares,
provis	ions for implementing the amendme	e, reclassification, or cancellation of i	
provis			
provis	ions for implementing the amendme not applicable, indicate N/A)		itself:
provis (if CESA	not applicable, indicate N/A) 2. PERALTA SELLS All HIS	SHMES to Lilian Hontilla	itself:
provis (if CESA AFTE	not applicable, indicate N/A) REPARTA SELLS ALL HIS SELLS	SHARES to LiliAN HONTILLA ,	itself: Fn \$100.00 F SHMF1.
provis (if Cesa Afte Cesaa	ions for implementing the amendment in applicable, indicate N/A) 2. PERALTA SELLS All HIS 3. THIS OPERATION, LIVING METERS AND LONGER	ent if not contained in the amendment SHAMES TO LIVIAN HONTILLA ONTILL HAS 100 1. OF TH A STAME HOLDER. BOT	itself: Fin \$100.00 F SHARD. H Lilian Ho
Drovis (if CESA AFTE CESAN	ions for implementing the amendment in applicable, indicate N/A) 2. PERALTA SELLS All HIS 3. THIS OPERATION, LIVING METERS AND LONGER	SHARES to LiliAN HONTILLA ,	itself: Fin \$100.00 F SHARD. H Lilian Ho

The date of each amendment(s	s) adoption:
	(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/were by the shareholders was/wer	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 ca	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/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	08/10/20 3
Signature	a director, president or other officer – if directors or officers have not been
selec	a director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	CESAR AGRALIA
	(Typed or printed name of person signing)
	VICE PARSIDENT
	VICE PN€SIDENT (Title of person signing)