

P07000016305

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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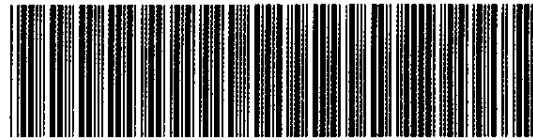
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend
C.COULLIETTE

DEC 28 2010

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TROPICAL TRADING CORP of Tequesta, INC
Name of Corporation

DOCUMENT NUMBER: P07000016305

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anthony Intili
Name of Contact Person

TROPICAL TRADING
Firm/Company

5699 U.S. Hwy #1
Address

Pt. St. Lucie, FL 34982
City/State and Zip Code

AJI1229@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anthony Intili at 561-578-9406
Name of Contact Person Area Code & Daytime Telephone Number
772-467-9199

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 14, 2010

ANTHONY INTILI
TROPICAL TRADING CORP OF TEQUESTA, INC.
5699 US HWY 1
PT ST LUCIE, FL 34982

SUBJECT: TROPICAL TRADING CORP OF TEQUESTA, INC.
Ref. Number: P07000016305

We have received your document for TROPICAL TRADING CORP OF TEQUESTA, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

To change the registered agent and the officers, you will need to file articles of amendment which I am providing in this packet. Please complete the forms and mail back with a copy of this letter.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 010A00028859

RECEIVED

10 DEC 27 AM 8:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Tropical Trading Corp of Tequesta, Inc

DOCUMENT NUMBER: P070000/6305

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anthony Intili
Name of Contact Person

Tropical Trading
Firm/ Company

5699 U.S. Hwy #1
Address

Pt St. Lucie, FL 34982
City/ State and Zip Code

AJI 1229 @ AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anthony Intili at (561) 578 9406
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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 Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Tropical Trading Corp of Tegueste, Inc
(Name of Corporation as currently filed with the Florida Dept. of State)

P07000016305

(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:

A. If amending name, enter the new name of the corporation:

The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Anthony J. Intili
1542 Jupiter Cove Dr
Jupiter, FL 33469

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Anthony J. Intili
1542 Jupiter Cove Dr

New Registered Office Address:

Jupiter, Florida 33469
(City) (Zip Code)

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10 DEC 28 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Anthony J. Intili
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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Pres	NANCY MANGELS	TROPICAL TRADING	<input type="checkbox"/> Add
		5699 U.S. HWY 1	<input checked="" type="checkbox"/> Remove
		PO BOX 34982	
Pres	Anthony Intili	1542 Jupiter Cove	<input checked="" type="checkbox"/> Add
		Jupiter, FL 33469	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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)

The date of each amendment(s) adoption: 12/15/10

(date of adoption is required)

Effective date if applicable: 12/15/10

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

☒ The amendment(s) was/were adopted 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.

Dated 12/15/10

Signature Anthony J. Intili

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Anthony J. Intili

(Typed or printed name of person signing)

Director

(Title of person signing)