## PD7000044724

(Re	equestor's Name)	<u>.</u>	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend (10/9/09

## **COVER LETTER**

TO: Amendment Section  Division of Corporations					
NAME OF CORPORATION: Diversified Supply, Inc.					
DOCUMENT NUMBER: P07000044724					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
George Urquiola  Name of Contact Person					
Diversified Supply, Inc. Firm/Company					
6923 Narcoosee Rd., Ste. 631					
Orlando, FL 32822 City/ State and Zip Code					
City/ State and Zip Code  +a+i 2612 @ mac. Com  E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:  George Urguiola at (407) 247-4744  Name of Contag 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 Certificate of Status  Certificate of Status  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

(Name of Corporation as currently filed with the

P0700004472	<u> </u>			19
(Document N	umber of Corporatio	n (if known)		•
Pursuant to the provisions of section 607.16 amendment(s) to its Articles of Incorporation		s, this <i>Florida P</i>	Profit Corporation adopts the following	g
A. If amending name, enter the new name	of the corporation:	<u>i</u>		
N/A			The new	
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or to name must contain the word "chartered," "p	he designation "Cor	rp," "Inc," or "(	Co". A professional corporation	
B. Enter new principal office address, if as (Principal office address MUST BE A STRE			Narcoosee Roa 631	d
		orian	ndo, FL 32822	
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)		6923	Narcoosee Roa	d
· • • • • • • • • • • • • • • • • • • •		Suit	2 631	
	<del>-</del>	OCIAN	do, FL 32822	
D. If amending the registered agent and/or new registered agent and/or the new re			a, enter the name of the	
Name of New Registered Agent:	SDMC A	2/A, 6-CD	rge Urquiola	
	6923 N	arcoos	rge Urquiola ce Rd., Suite 63	<b>3</b> (
New Registered Office Address:	(Floride	a street address)	<del></del>	
	Oriand	<b>.</b>	, Florida 32822 (Zip Code)	
	(City)		(Zip Code)	
New Registered Agent's Signature, if chang I hereby accept the appointment as registered			pt the obligations of the position.	
_	Signature of New R	legistered 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>	Annie Diaz Toro	9581 PineLilly Orlando, FL 32827	Add Remove
<u> </u>	Irma Urquiola	9760 LOBIOTIY PINC CIPCLE OPLAND FL 3282	☐ Add
<u>P</u>	George Urquidla	9760 LOBIOILY Dine Circle Orlando, FL 3282	_
	ling or adding additional Articles, enter ditional sheets, if necessary). (Be specij		
	1 -120-		
provisio	nendment provides for an exchange, recloses for implementing the amendment if pot applicable, indicate N/A)		
		·	

,	adoption: NOV. 11, 2009
	(date of adoption is required)
Effective date if applicable:	
(1	no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	at for the amendment(s) was/were sufficient for approval
by	oting group)
(ve	oting group)
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	Deorge Dequele
selecte	director, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
<u>-</u>	George Wellish (Typed or printed name of person signing)
	(Typed or printed name & person signing)
	President.
_	(Title of person signing)