P07000084654

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COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: OZOM POOL SCYUTCOS INC
DOCUMENT NUMBER: P0700084654
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jaime 6 (Olla Zos Name of Contact Person
Boynton Brach Florida 33435 City/ State and Zip Code
Boynton Brack Florida 33435 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jaime E (Ollazos at 561) 889 96 77 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 Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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NIA

(Name of Corporation as current	tly filed with the Florida Dept, of State)
N / A	ay into water tily I for four Began or Densy
	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	130 NE 26th AVE Bldg 4 Apt 102
(Francipus office dataress <u>MOST BE A STREET ADDRESS</u>)	B1204 Apt 102
	Boynton BettcH Florida 35435
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	130 NE 76th AVE
	Bldg 4 Apt 102
	Bornton Brach Florida 33435
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent N/A	
NIA	rreet address)
(Florida si	treet address)
New Registered Office Address: 130 NE 2614	AVE Bldg 4 Apt 102 Florida 33 435 (City) (Zin Code)
•	(=
New Registered Agent's Signature, if changing Registered Agent	.
I hereby accept the appointment as registered agent. I am familiar	
N /A	
	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, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:	ואר איני	John Doe	
X Change	<u>PT</u>		
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change			130 NE 26th AUR
Add			Bldg 4 Apt 102
Remove			Boynton Boach Florick
2) Change			
Add			
Remove			
3)Change	<u></u>		·
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			<u>.,, .,, .,, .,, .,, .,, .,, .,, .,, .,,</u>
6) Change		_	
Add			
Remove			

E. If amending or addi (Attach additional sh	ing additional Article	es, enter chang (Be specific)	e(s) here:		
	•		change	the	Principal Office
address . zir	nd mailing	- Addres	۶.		
Thank wo	u For you	r help	with the	5 m2	Her. 1
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		······································			
. If an amendment pr	ovides for an exchan	ge, reclassifica	tion, or cancellation	on of issued	l shares.
provisions for impl	ementing the amend le, indicate N/A)	ment if not con	tained in the ame	ndment itse	elf:
NIA					
				· · · · · · · · · · · · · · · · · · ·	
		<u>, , ,</u>			
	·····	····			
					

The date of each amendment(s) adoption: NOV - 04 - 2016.	if other than the
The date of each amendment(s) adoption: NOV - 09 - 2016. late this document was signed.	II Ould tike tie
Effective date if annihing hie: Nov - 10 - 2016.	
Effective date if applicable: $Nov - 10 - 2016$. (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	rill not be listed as the
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 N/A.	
by NiA. (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 Nov - 09 - 2016	
Signature	
(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)	
appointed inductary by that inductary)	
JAIME E COLLA ZOS (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
PD.	
(Title of person signing)	