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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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· (Do	cument Number)	
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Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORA	ATION: KEREK	TEAM, INC.		_		
DOCUMENT NUMBE	er: P0800	0030122				
	f Amendment and fee are su					
-	ondence concerning this ma	•				
ricase return an corresp	ondence concerning this ma	iter to the following.				
_	MARIS	OL LAU				
		Name of Contact Perso	n			
	KERE	K TEAM, INC.				
-		Firm/ Company				
	13101	SW 29 ST	REET			
_		Address				
_	MIR	IMAR, FL 3	327			
_		City/ State and Zip Cod	le			
	ΜΛΩτςοι	1 411 6 14100	roM			
	E-mail address: (to be us	LAU @ YAHOO. c	notification)			
				-		
For further information of	concerning this matter, pleas	se call:		VEC.	16 JUL 25	
					F	1-1
	ISOL LAU	at (305	<u>, 450 - 5029</u>	73.5	25	
Name of	Contact Person	Area Co	ode & Daytime Telephone Nu	mber	<u>~</u>	
Enclosed is a check for t	he following amount made	payable to the Florida Dep	artment of State:		13	
_		_	_		59	
□ \$35 Filing Fee	E\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy	☐\$52.50 Filing Fee Certificate of Status	24.1.1		
		(Additional copy is	Certified Copy			
	# 926	enclosed)	(Additional Copy is enclosed)			
Mailir	ng Address	Straat	Address			
	dment Section		Iment Section			

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment

to

Articles of Incorporation

or por accon	1.6 % ~
1. INC.	TOS E
y filed with the Florida Dept. of State)	122. 5
30122	
f Corporation (if known)	
Florida Profit Corporation adopts the fo	llowing amendme
N/A	TI.
n," "company," or "incorporated" or Co". A professional corporation name P.A."	The new the abbreviation must contain the
N/A	
N/A	
ress in Florida, enter the name of the	
L LAU	
ect address)	
. Florida	
(City)	(Zip Code)
<u>t</u> <u>vit</u> h and accept the obligations of the pos	ition.
	y filed with the Florida Dept. of State 3 0 2 2 [Corporation (if known)] Florida Profit Corporation adopts the form N/A n," "company," or "incorporated" or Co". A professional corporation name (P.A." N/A ress in Florida, enter the name of the incorporated in the incorporate in the incorporation in the incorporate in the incorporation in the incorporate in the incorporation in the incorporate in the incorporate in the incorporation in the incorporation in the incorporate in the incorpora

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:

X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	DPS	LAU, MIN	13101 SW 29 STREET
Add			MIRAMAR, FL 33027
Remove			
2) Change	PTD	LAU, MARISOL	13101 SW 29 ST.
Add			MIRAMAR, FL 33027
Remove			
3) Change			_
Add			
Remove			
4) Change			-
Add			
Remove			
5) Change		•	
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>addition</i>	r adding additional Art nal sheets, if necessary).	(Be specific)	sj nere:		
	N/A				
					•
				, , , , , , , , , , , , , , , , , , ,	
		<u> </u>			
<u>provisions for</u>	ent provides for an excl r implementing the ame olicable, indicate N/A)	hange, reclassification	on, or cancellation lined in the amend	of issued shares, ment itself:	
<u> </u>	····	<u> </u>			
					
	N/A				

The date of each amendment(s date this document was signed.	s) adoption:	, if other than the
Effective date <u>if applicable</u> :	July 20, 2016 7/20/	16
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirent Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the e sufficient for approval.	amendment(s)
	approved by the shareholders through voting groups. The follo for each voting group entitled to vote separately on the amend	
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voung group)	
action was not required.	adopted by the board of directors without shareholder action are adopted by the incorporators without shareholder action and shareholder action are adopted by the incorporators without shareholder action are adopted by the incorporators without shareholder action and shareholder action are adopted by the incorporators without shareholder action and shareholder action are adopted by the incorporators without shareholder action and shareholder action action and shareholder action actio	
Dated	7/20/16	
sele	a director, president or other officer – if directors or officers have ted, by an incorporator – if in the hands of a receiver, trustee, cointed fiduciary by that fiduciary)	
	MARISOL LAU (Typed or printed name of person signing)	ANG TO
	PRESIDENT/DIRECTOR (Title of person signing)	FILED PH 2:59