# P08000036174

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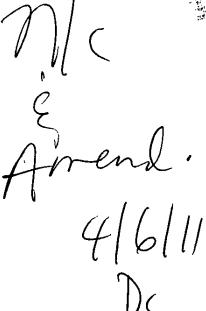
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#### COVER LETTER

TO: Amendment Section **Division of Corporations** Jemima Garcia P.A. NAME OF CORPORATION: \_\_ DOCUMENT NUMBER: <u>70800036174</u>

Please return all correspondence concerning this matter to the following:

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

Firm/ Company

Pembrole Pines, Fl. 33082
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

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			ノ	ed to
Jemina (	Sania	. P.A		10	3
(Name of Corporation as current			pt. of State)	<del>-</del>	7
P0800003					14
(Document Numbe	<del></del>	····· · · · · · · · · · · · · · · · ·			ر در این
•	•			**	
Pursuant to the provisions of section 607.1006, Immendment(s) to its Articles of Incorporation:	Florida Statu	ites, this <i>Florid</i>	a Profit Corpo	<i>ration</i> adopts th	e föllowing
A. If amending name, enter the new name of th	<u>iè corporati</u>	on:			
Jem Clavii	o P.	Α.		The	new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the dename must contain the word "chartered," "profes.	word "coresignation "C	Corp," "Inc," o	r "Co". A pro	ncorporated" of fessional corpor	r the
3. Enter new principal office address, if applica Principal office address <u>MUST BE A STREET A</u>			<del></del>	<del>),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	
				<del></del>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>'BOX</u> )	P.O. (	30x 821 L?ines,F1.	4636 33028	
D. If amending the registered agent and/or registered agent and/or the new register			orida, enter the	name of the	
Name of New Registered Agent:					
New Registered Office Address: (Florida street address)					
			, Flo	rida	
_	(City)	)	(Zip Code		
lew Registered Agent's Signature, if changing hereby accept the appointment as registered agen	nt. I am fan	niliar with and a			tion.
Sign	iature of Nev	v Registered Ag	ent, 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)

Title	<u>Name</u>	Address	Type of Action
<u></u>	Jemima E Garia	16913NW89d.	☐ Add ☐ Remove
<u>P</u>	Jem E Clavijo	16913 NW89 ct. Lejami Cales, FI 33018	Add Remove
<del></del>			☐ Add ☐ Remove
(attac	h additional sheets, if necessary). (Be spec	ific)	
	n amendment provides for an exchange, rev visions for implementing the amendment if		
	(if not applicable, indicate N/A)		
			1 1

· ·	_	i 1	1
The date of each amendment(s) ado	option:3	29	[1]
	, (date of adoption	is require	ed)
Effective date if applicable:	انامضام	-	
(no m	ore than 90 days after amendi	nent file a	date)
	, ,	•	·
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adop by the shareholders was/were suff	· ·	number o	f votes cast for the amendment(s)
The amendment(s) was/were appromust be separately provided for ed			
"The number of votes cast for	r the amendment(s) was/were	sufficient	for approval
by		"	
(votine	g group)		
,	36 147		
The amendment(s) was/were adop action was not required.	sted by the board of directors v	vithout sh	nareholder action and shareholder
The amendment(s) was/were adop action was not required.	oted by the incorporators without	out shareh	older action and shareholder
Dated 3	29/11		
selected, by	tor, president the first of the har fiduciary by that fiduciary	if direct	tors or officers have not been receiver, trustee, or other court
	Temima E (Typed or printed name	-	
	Presiden	1+	
	(Title of person signing)		