## Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: FORCALBER SERVICES INC

Account Number : 120150000098 Phone

: (305)713-9142

Fax Number

: (815)550-9948

R. WHITE

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

## COR AMND/RESTATE/CORRECT OR O/D RESIGN MAZBEK INC.

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Corporate Filing Menu

Help

## COVER LETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: MAZBEK INC.					
DOCUMENT NUM	DUBUUUUAUUS	2			
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this matter to the following:					
	JUAN CARLOS	ALBER			
	ALBER TAX ACC	Name of Contact Perso	n		
	ALBER IAN ACC				
	11401 SW 40TH	Firm/ Company ST SUITE 260			
		Address			
	MIAMI, FL 33165				
	<u> </u>	City/ State and Zip Cod	е		
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<u> </u>	C.ALBER@HOTN	VIAIL.COIVI			
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For further information	For further information concerning this matter, please call:				
JUAN CARLOS ALBER (305 ) 713-9142					
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Piling Fee	☐\$43.75 Filling Fee & Certificate of Status	□\$43.75 Filing Fee & Cordfied Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Malling Address Street Address					
Amendment Section			Iment Section		
Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building					
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301					

From: JUAN ALBER

Pg 3/ 6 09/30/15 9:08 am-

Articles of Amendment to Articles of Incorporation of 15 SEP 30 AM 0: 38

TO FI

TALLAHASSLE, FLORINA

(Name of Corporation on curr P08000040032	ently filed with the Florids Dent. of State)
(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 607.1006, ts Articles of Incorporation:	Plorida Statutes, this Florida Profit Corporation adopts the following amendment(s
1. If amending name, enter the new name of	Lthe corporation:
name must be distinguishable and contain to "Corp" "Inc.," or Co.," or the designation word "chartered," "professional association,"	he word "corporation," "company," or "incorporated" or the abbreviation "Corp," "inc," or "Co". A professional corporation name must contain the or the abbreviation "P.A."
B. <u>Enter new principal office address, if app</u> Principal office address <u>MUST BE A STREE</u>	
C. Enter new mailing address. if applicable (Mailing address MAY BE A POST OFFIC	
	registered office address in Florida, enter the name of the
). if amending the registered agent and/or to new registered agent and/or the new registered Agent  Name of New Registered Agent	stered office address:
new registered agent and/or the new regi	
new registered agent and/or the new regi	(Florida street address)

Signature of New Registered Agent, if changing

Example:

From: JUAN ALBER

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.

X_Change	PI	John Doc	
X Remove	¥	Mike Jones	
X Add	SY	Sally Smith	
Type of Action (Check One)	Tkle	Name	<u>Address</u>
1) Change	VP	MICHELE MAZZARO	13242 NW 11TH ST
Add			Pembroke Pines, FL 33028
Remove			
2) Change			_
Add		·	
Change		<u> </u>	
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			***
6) Change			
Add			
Remove			

From: JUAN ALBER

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From: JUAN ALBER

Pg 6/ 6 09/30/15 9:08 am

The date of each amendment(s) ado date this document was signed.	ption; 09/29/2015	if other than the
Effective data if applicable:		
<del></del>	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) ident for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	er the amendment(s) was/were sufficient for approval	
by	(voling group)	
action was not required.	ted by the board of directors without shareholder action and shareholder ted by the incorporators without shareholder action and shareholder	
Dated_09/29/201	M Hre	
(By a dire selected,	potor, president or other officer — if directors or officers have not been by an incorporator — if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	_
K	YONG R MAZZARO	
_	(Typed or printed name of person signing)	<del></del>
<u> </u>	PRESIDENT	
_	(Title of person signing)	