

POS0000052099

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : INDEPENDENT TAX SERVICE
Account Number : I20020000072
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Fax Number : (305) 884-6444

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUL 15 PM 3:51

COR AMND/RESTATE/CORRECT OR O/D RESIGN

RUBEN'S CARPENTRY & PAINTING, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Amend
Name chg
@ 7/15/08

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: RUBEN'S CARPENTRY & PAINTING, INC.

DOCUMENT NUMBER: P08000052099

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

Please return all correspondence concerning this matter to the following:

ROJAS, RUBEN L

(Name of Contact Person)

RUBEN'S CARPENTRY & PAINTING, INC.

(Firm/ Company)

21020 SW TH AVE ROAD

(Address)

MIAMI, FL 33177

(City/ State and Zip Code)

For further information concerning this matter, please call:

ROJAS, RUBEN L

(Name of Contact Person)

at (305) 259-5110

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$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



July 15, 2008

FLORIDA DEPARTMENT OF STATE

Division of Corporations

RUBEN'S CARPENTRY & PAINTING, INC.
21020 SW 7TH AVE ROAD
MIAMI, FL 33177

SUBJECT: RUBEN'S CARPENTRY & PAINTING, INC.
REF: P08000052099

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 908A00041372

RECEIVED
2008 JUL 15 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
08 JUL 15 PM 3:57

**Articles of Amendment
to
Articles of Incorporation
of**

RUBEN'S CARPENTRY & PAINTING, INC.

(Name of corporation as currently filed with the Florida Dept. of State)

P08000052099

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

A M G BOOKEEPING SERVICES, INC. :

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

ARTICLE VII - INITIAL OFFICERS AND/OR DIRECTORS

DELETE: RUBEN L ROJAS - P - 21020 SW TH AVE ROAD, MIAMI FL. 33177

AD: ALFONSO GUTIERREZ VELARDE - P - 5950 NW 191 TERR MIAMI, FL. 33015

DELETE: PRINCIPAL PLACE OF BUSINESS - 21020 SW TH AVE ROAD, MIAMI FL. 33177

DELETE: MAILING ADDRESS - 21020 SW TH AVE ROAD, MIAMI FL. 33177

DELETE: REGISTERED AGENT- RUBEN L ROJAS - 21020 SW TH AVE ROAD, MIAMI FL. 33177

AD: PRINCIPAL PLACE OF BUSINESS - 5950 NW 191 TERR MIAMI, FL. 33015

AD: MAILING ADDRESS - 5950 NW 191 TERR MIAMI, FL. 33015

AD: REGISTERED AGENT - ALFONSO GUTIERREZ VELARDE - 5950 NW 191 TERR MIAMI, FL. 33015

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: 06/30/2008

Effective date if applicable: 06/30/2008
(no more than 90 days after amendment file date)

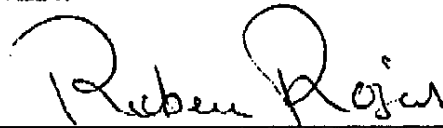
Adoption of Amendment(s) **(CHECK ONE)**

- The amendment(s) was/were approved 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
_____"
(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.

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)

RUBEN L ROJAS

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE: \$35

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501, or 617.0501, Florida Statutes, the under signed corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1.- *The name of the corporation is:* **A M G BOOKKEEPING SERVICES, INC.**

2.- *The name and address of the registered agent and office is:*

Name - **ALFONSO GUTIERREZ VELARDE**

Address - **5950 NW 191 TERR MIAMI FL 33015**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

SIGNATURE: _____



DATE: 06/30/2008