P08000056916

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Per Olga Diaz Corrected Document 11-17-10 Dc

Office Use Only

000187271070

11/08/10--01009--017 **35.00

10 NOV 17 PM 2:45

Amend. 11-17-10 Dc

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
10 NOV 17 AM 8:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

November 10, 2010

OLGA DIAZ
KOHTLER ELEVATOR INDUSTRIES, INC.
4115 B N.W. 132 STREET
OPA LOCKA, FL 33054

SUBJECT: KOHTLER ELEVATOR INDUSTRIES, INC.
Ref. Number: P08000056916

We have received your document and check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell
Regulatory Specialist II

Letter Number: 010A00026516

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Kohtler Elevator Industries

DOCUMENT NUMBER: P080000056916

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

Please return all correspondence concerning this matter to the following:

Olga Diaz
Name of Contact Person

Kohtler Elevator Industries
Firm/ Company

4115 B NW 132 st
Address

Opa Locka, FL 33054
City/ State and Zip Code

vero@kohtler.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Olga Diaz at (305) 687-7037
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

☐ $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

Kohtler Elevator Industries, Inc.

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

P08000056916

(Document Number of Corporation (if known)

16 NOV 17 PM 2:15

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

A. If amending name, enter the new name of the corporation:

_____ *The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

4115 B NW 132 st

Opa Locka, FL 33054

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: Olga Diaz

New Registered Office Address: 4115 B NW 132 st *(Florida street address)*

Opa Locka, Florida 33054
(City) *(Zip Code)*

New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Olga M Diaz
Signature of New 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)

Title	Name	Address	Type of Action
D	Laura M Gerena	4115 B NW 132 st Opa Locka, Fl 33054	☐ Add ☑ Remove
PD	Olga Diaz	4115 B NW 132st Opa Locka, Fl 33054	☑ Add ☐ Remove
			☐ Add ☐ Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an 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)

The date of each amendment(s) adoption: 11-15-10
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 _____."
(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 11/15/2010

Signature Olga Diaz
(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)

Olga Diaz
(Typed or printed name of person signing)

Officer - P/D
(Title of person signing)