

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6380

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number W Phone Account Number: 072450003255

: (305)634-3694

Fax Number

: (305)633-9696

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ICS CORAL GABLES, INC.

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المرابع المرابع	Articles of Amendmen	
A	rticles of Incorporatio	
	of	11/60 6
ICS CORA	L GABLES, INC.	a Dept. of State)
Name of Corporation as curren	ntly filed with the Florid	a Dept. of State)
P080	000064117	in the second se
(Document Numi	ber of Corperation (if kno	wa)
ursuant to the provisions of section 607.1006, mendment(s) to its Articles of Incorporation:	, Florida Statutes, this F	lorida Profit Corporation adopts the following
. If amending name, enter the new name of	the corporation:	
		The new
ame must be distinguishable and contain th	ie word "corporation,"	"company," or "incorporated" or the
bbreviation "Corp.," "Inc.," or Ca" or the a ame must contain the word "chartered," "profi	designation "Corp." "Inc	" or "Co". A professional corporation
	mainten machtiniteit ai	see mont diffusion 1 mm
Enter new principal office address, if appli		
Principal office address <u>MUST BE A STREET</u>	AUURESS)	
		
. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFIC	<u>E BOX</u>)	
Tfdiag she weak-to-ad onedia		The state of the s
. If amending the registered agent and/or re- new registered agent and/or the new regist		I MOTOR, Enter the name of the
N CV D CV 14		
Name of New Registered Agent;		
New Registered Office Address:	(Florida street a	ddress)
New Registered Office Address:	(Florida street a	·
New Registered Office Address:	<u> </u>	, Florida
	(City)	·
ew Registered Agent's Signature, if changing	(City)	Florida (Zip Code)
_	(City)	Florida (Zip Code)

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If amunding 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 <u>Address</u> Type of Action P/D ROLAND KINDELL 1627 BRICKELL AVENUE ☑ Add # 1505 ☐ Remove MIAMI, FL 33129 ע/ד/ם MARIA KINDELL 1627 BRICKELL AVENUE ☑ Add □ Remove **\$ 1505** MIAML FI 33129 S/D LIANE FONSECA 888 BRICKEL KEY DRIVE ☑ Add UNIT # 2502 Remove MIAMI, FL 33131 E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (He specific) PLEASE NOTE, THAT THE NAME MARIA PADOVAN SHOULD BE REPLACED WITH MARIA KINDELL. MARIA KINDELL IS MARIA PADOVAN'S NEW MARRIED NAME. 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 Irself: (if not applicable, indicate N/A)

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The Note of each amendment	(s) adoption:	08/05/09	· H09000171579		
The date of each smeadment	(date of adoption is requ	ired)		
Effective date if applicable: (no more than 90 days after amendment file date)					
Adoption of Amendment(s)	(CHEC	K ONE)			
The amendment(s) was/we by the shareholders was/w			of votes cast for the amendment(s)		
			ing groups. The following statement rately on the amendment(s):		
• •		ent(s) was/were sufficien	at for approval		
by	(voting group)		•		
	(voting group)				
The amendment(s) was/we action was not required.	re adopted by the bo	ard of directors without	shareholder action and shareholder		
The amendment(a) was/we action was not required.	re adopted by the inc	corporators without share	cholder action and shareholder		
	8/5/07				
Signature		PLEE			
(By	a director, presiden	t or other officer – if dire	ectors or officers have not been		
	cied, by an incorpor		a receiver, trustee, or other count		
	Office wheeter? by	the merital			
		ROLAND KINDEL			
	(Турес	or printed name of pers	on signing)		
		PRESIDENT			
	(Title of p	erson signing)			

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