# P08000085228

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<b>⇒</b> #)
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(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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### **COVER LETTER**

TO: Amendment Section Division of Corporations

	JN PREC	1210N MOR	KK CURP
NAME OF CORPOR	ATION:P0800	0085228	
DOCUMENT NUMB	ER:	· · · · · · · · · · · · · · · · · · ·	<u></u>
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following: OHORA SUA	REZ
-	JN PREC	ISTON WOR	K CORP
-	15911	NW 49 AVE	
-	MIAMI G	ARDENS FL	33014
<del>-</del>		City/ State and Zip Cod	e
	sandys	783@yahoo.	com
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
· ·	JAREZ		
	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mail	ing Address	Street	Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment

to

# JN PRECISION WORK CORP

(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this <i>Florida Profit C</i>	orporation adopts the follow	ving amendment(s) to
A. If amending name, enter the new name of the co	orporation:		
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	," "Inc," or "Co". A profess. abbreviation "P.A." e:	or "incorporated" or the onal corporation name mu	The new abbreviation is contain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO		.,,,,	OCT 29 AH 9: 17
D. If amending the registered agent and/or register new registered agent and/or the new registered		enter the name of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:	(City)	, Florida(Zip Code)	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		he obligations of the position	эп.
Signature of N.	ew Registered Agent if changin	σ	

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 Doc 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 Doc, PT as a Change, Mike Jones. V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>Joh</u>	un Doc	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)  1) Change  X Add  Remove	<u>Title</u> VP	JORGE SUAREZ	Address 2300 NORTH SHERMAN Circle Apt 104 MIRAMAR FL 33025
2) Change Add	P	NOHORA SUAREZ	Change address: 3011 West 76 St Apt 208 HIALEAH GARDENS FL 33018
Remove  Change  Add  Remove	T	JOSE L. SOLIS	Change address: 3011 West 76 St apt 208 HIALEAH GARDENS FL 33018
4) Change Add Remove			
5) Change Add Remove			
6) Change Add			

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The state of the s	
an amendment provides for an exchange, reclassification, or cancellation of issued sha rovisions for implementing the amendment if not contained in the amendment itself:	ares.
(if not applicable, indicate N/A)	
<del></del>	

## 10/25/2012

The date of each amendmen <b>1.0</b> /d	<b>2,5/</b> ,2 <u>012</u>
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement 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)
	(voting group)
action was not required.	pted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
action was not required.	production in the state of the
5 10	/25/2012
DatedSignature	
	irector, president or other officer - if directors or officers have not been
	d, by an incorporator – if in the hands of a receiver, trustee, or other court
арротп	ted fiduciary by that fiduciary)
	NOCHORA Swares.
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)