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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 12, 2009

JULIO RAMIREZ AJUCLA CORP 1851 W. CHATHAM RD. WEST PALM BEACH, FL 33415

SUBJECT: AJUCLA.CORP Ref. Number: P08000087293

We have received your document for AJUCLA.CORP and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6880.

Karen Gibson Document Specialist Supervisor

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

Letter Number: 709A00000962

COVER LETTER

TO: Amendment Section

Division of Corporations	•
NAME OF CORPORATION:	cla. Corp
DOCUMENT NUMBER: PO 800	00087293
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	atter to the following:
Julio Ramin	rez-
(Name of C	ontact Person)
AJucia. (Firm)	Corp
Firm/	Company)
巴马斯 1851 W. Cha	than Rd.
	ldress)
AJUCIA. (Firm/ West Palm 66 (City/ State For further information concerning this matter, ple	each, Fl. 33415 and Zip Code)
(City/ State	and Zip Code)
For further information concerning this matter, ple	ase call:
Volio Ramire 2 (Name of Contact Person)	at (561) 309 - 1312
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:
\$35 Filing Fee \$ Certificate of Status	\$43.75 Filing Fee & \$52.50 Filing Fee Certified Copy Certificate of Status
田 additional \$10.00	(Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation currently filed with the Florida Dept. of State)

(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:

. If amending name, enter the new name of SChoolSho		 .	
he new name must be distinguishable a incorporated" or the abbreviation "Corp.," Co". A professional corporation names a sociation," or the abbreviation "P.A."	nd contain the "Inc.," or Co.,	word "corporation" or the designation	"Corp," "Inc," or
Enter new principal office address, if app Principal office address MUST BE A STREE			·
Enter new mailing address, if applicable (Mailing address <u>MAY BE A POST OFFI</u>			
If amending the registered agent and/or new registered agent and/or the new regi			nter the name of the
Name of New Registered Agent:			
New Registered Office Address:	(Florid	la street address)	<u> </u>
		(City)	, Florida (Zip Code)
ew Registered Agent's Signature, if changi hereby accept the appointment as registered osition.			cept the obligations of
<u></u>	Signature of New	Registered Agent, if c	hanging

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)

<u>[itle</u> ←	Name	<u>Address</u>	Type of Action
	Michael Wilson		
•		pompano bch F	
		· •	ררא אם
			□ Add □ Remove
			Add Remove
	,		Greenove
	ding or adding additional Articles, en		
(attach a	dditional sheets, if necessary). (Be sp	pecific)	
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	mendment provides for an exchange, ions for implementing the amendmen		
	not applicable, indicate N/A)		
the	100 Shares W	ill be distri	buted as
			·
<i></i>			
51		Julio Ramire	2
49	Shares to	nichael Wils	.00
			· -
			<u></u>
	, 4-	-	

.Τ'n	e date of each amendment	(s) adoption:	···· fel	$\frac{6}{3}$ $\frac{3}{2009}$	
	fective date <u>if applicable</u> :				
		(no more than 90 day	s after amendme	nt file date)	
Ad	option of Amendment(s)	(CHECK	ONE)		
	The amendment(s) was/wer by the shareholders was/we			mber of votes cast for the amer	ndment(s)
				h voting groups. The following separately on the amendment(
	"The number of votes of			fficient for approval	
	by	(voting group)			
	The amendment(s) was/wer action was not required.	e adopted by the boar	d of directors wit	hout shareholder action and sh	areholder
g	The amendment(s) was/wer action was not required.	e adopted by the inco	rporators without	shareholder action and shareholder	older
	Dated	2-03-2 Julio	2009		
	(By sele	a director, president o cted, by an incorporat	or other officer — i or — if in the hand	if directors or officers have not ds of a receiver, trustee, or othe	
	арро	ointed fiduciary by the		•	
		(Typed c	or printed name of	f person sig ning)	
			,		
		Preside	itle of person sign	ning)	