

P08000106351

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

Broward Chamber of Commerce Association INC.
3090 NW 60 Avenue
Lauderhill FL 33313

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/12/10--01015--009 **35.00

FILED
2010 AUG 27 PM 1:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

TB

AUG 27 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Broward chauffeur association inc

DOCUMENT NUMBER PO0000106351

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

Please return all correspondence concerning this matter to the following:

Jacob I St Pierre
Name of Contact Person

N/A
Firm/ Company

3990 NW 60 AVENUE
Address

Lauderhill FL 33313
City/ State and Zip Code

NONE
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacob I St Pierre at (954) 822-5378
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:

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 13, 2010

BROWARD CHAUFFEUR ASSOCIATION, INC.
3090 NW 60TH AVE
LAUDERDALE, FL 33313

SUBJECT: BROWARD CHAUFFEUR ASSOCIATION, INC.
Ref. Number: P08000106351

We have received your document for BROWARD CHAUFFEUR ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 010A00017051



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 3, 2010

JACOB I ST PIERRE
3090 NW 60TH AVE
LAUDERDALE, FL 33313

SUBJECT: BROWARD CHAUFFEUR ASSOCIATION, INC.
Ref. Number: P08000106351

We have received your document for BROWARD CHAUFFEUR ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We did not receive the third page of the amendment. Enclosed is the third page to be completed and returned.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 610A00018646

Articles of Amendment
to
Articles of Incorporation
of

Broward Chauffeur Association, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

08000106351

(Document Number of Corporation (if known))

FILED
2010 AUG 27 PM 1:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

NONE

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)

3090 NW 60 AVENUE
LAUDERHILL FL
33313

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

NONE

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:

JACOB I ST PIERRE

New Registered Office Address:

3990 NW 60 AVENUE

(Florida street address)

LAUDERHILL FL 33313, Florida FL

(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.

JACOB I ST PIERRE

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
President	Jeanclaude voltaire	3090 NW 60 Avenue	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Secretary	Pierre lebrun	3090 NW 60 Avenue Jauderhill FL 33313	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Treasurer	OMIEL GeFFrand	3090 NW 60 Avenue Jauderhill FL 33313	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

N/A

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)

N/A

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>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
President	Jacob IN. St PIERRE	3090 NW 60 Avenue Lauderhill FL 33313	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Secretary	YVES NICOLAS	3090 NW 60 Avenue Lauderhill FL 33313	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Treasurer	Charles willio	3090 NW 60 Avenue Lauderhill FL 33313	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

N/A

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)

N/A

The date of each amendment(s) adoption: 12-05-08
(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 8/23/2010

Signature

Jacob INNOCENT ST PIERRE
(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)

Jacob Innocent St Pierre
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)