P09000010024

(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:
,

Office Use Only



200156717102

06/15/09--01016--002 **35.00

O9 JUN 15 AM 8: 19
SECRETARY OF STATE
ALL'AHASSEE, FLORID.

V. C.

C.COULLIETTE

JUN 1 7 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION: SO	JTH FLORIDA FIRE EQUIPMENT, INC
DOCUMENT NU	JMBER:	P09000010024
The enclosed Artic	cles of Amendment and fe	e are submitted for filing.
Please return all co	orrespondence concerning	this matter to the following:
		Craig Kirsch
		Name of Contact Person
	AI	coba & Associates, P.A.
		Firm/ Company
	3399	NW 72 Avenue, Suite 211
		Address
	Miami, Florida 33122	
		City/ State and Zip Code
	E-mail address: (to be	used for future annual report notification)
For further inform	ation concerning this mat	er, please call:
	Craig Kirsch	at (305)362-8118
Name	of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a chec	k for the following amour	t made payable to the Florida Department of State:
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SOUTH FLORIDA FIRE EQUIPMENT, INC

(Name of Corporation as currently filed with the Florida Dept. of State)	
P0900010024	

(Document Number of Corporation (if known)

A. If amending name, enter the new name of	of the corporation	on:		
SOUTH FLORID				The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "C	Corp," "Inc," or "	Co". A professi	
B. Enter new principal office address, if app	olicable:			
(Principal office address MUST BE A STREE	ET ADDRESS)	Λ /	1 1	SE O
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)	CE BOX)			9 JUN 15 AM 8: 49 CRETABY OF STATE AHASSEE, FLOR D
D. If amending the registered agent and/or			da, enter the nan	<u>re of the</u>
new registered agent and/or the new reging Name of New Registered Agent: New Registered Office Address:	(Flb)	ida strept hadress)		
	$\frac{1}{City}$, ((, Florida_ (Zip Code)	<u></u>
	(0.0)		(Lip Couc)	
New Registered Agent's Signature, if changi I hereby accept the appointment as registered of			ont the obligation	a of the monition
	Sign atoms of the	1/14	if alamaina	ь ој те ро <i>ѕ</i> шоп.

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>	/ , !	Address	Type of Action
	/	1 / /	1	☐ Add☐ Remove
				☐ Add ☐ Remove
	<u> </u>	/ / /		☐ Add☐ Remove
E. If ame	nding or adding addit additional sheets, if ne	ional Articles, enter cha cessary). (Be specific)	nge(s) here:	
	-//-	\mathcal{H}		
		(
E If an a		6	<i>•</i>	
provis	sions for implementing	for an exchange, reclassing the amendment if not one	tication, or cancellation on tained in the amen	on of issued shares, dment itself:
(if	not applicable, indicat	e N/A)		
			· ·	
	γ			

	6/8/09
The date of each amendment(s)	Adoption:
Effective date if applicable:	6/8/09
(n	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s ufficient for approval.
The amendment(s) was/were a must be separately provided for	oproved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	for the amendment(s) was/were sufficient for approval
by	,,
by	fing group)
The amendment(s) was/were a action was not required.	lopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated	18/09
Signature	regor, president or other officer – if directors or officers have not been
selecte	by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
· _	YAVET GONZALEZ
	(Typed or printed name of person signing)
_	PRESIDENT
	(Title of person signing)