PM 200024645

(Requ	uestor's Name)	
(Addr	ress)	
(Addr	ess)	
(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	me)
(Docu	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



400261717734

07/09/14--01019--004 **35.00

14 JUL -9 /3 II 0

HUG

JUL 24 2014

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

	ATION: A.C.P. QUA		S, INC.			
	Amendment and fee are su					
Please return all corresp	ondence concerning this ma	tter to the following:				
	AUGUSTO CESA	AR PERALTA				
_		Name of Contact Persor	1			
A.C.P. QUALITY SERVICES, INC.						
_		Firm/ Company				
4126 SUCCESS STREET						
-		Address				
1	WEST PALM BEACH, FL. 33406					
-		City/ State and Zip Code	•			
aug	ustocesarperalta	@vahoo.es				
	•	sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
Augusto Cesar Peralta at (561) 201-7737						
Name of 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)	☐\$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				

Articles of Amendment

	Articles of Incorporation	FILED
J.C.P. Quali	Ly Services, In.	14 JUL -9 /H H: 04
(Name of Corporation as c	urrently filed with the Florida Dept. of State)	DABLAR AND SAL, I LOUISE
(Document	Number of Corporation (if known)	•
suant to the provisions of section 607.10 Articles of Incorporation:	006, Florida Statutes, this <i>Florida Profit Corpora</i>	tion adopts the following amendment
If amending name, enter the new nam	ne of the corporation:	The new
	applicable:	
Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
(Mailing address <u>MAY BE A POST Oi</u>	FFICE BOX) /or registered office address in Florida, enter t	he name of the
(Mailing address MAY BE A POST Of	FFICE BOX) /or registered office address in Florida, enter t	he name of the
If amending the registered agent and/ new registered agent and/or the new	FFICE BOX) /or registered office address in Florida, enter t	he name of the

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)

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

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	<u></u>		SANDRA MATIAS	4126 SUCCESS ST
Add				WEST PALM BEACH,FL.
Remove				33406
2) Change				
Add				
Remove				
3) Change	<u></u>			
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

mending or adding additional Arti ach additional sheets, if necessary).	(Be specific)			
				
		/		
	/	/ 		
			·	
	/			
/				
				
				<u></u>
•				
n amendment provides for an exch	ange, reclassification	n, or cancellatio	n of issued shares,	
ovisions for implementing the ame (if not applicable, indicate N/A)	idment if not conta	ined in the amen	dment itself:	
			_	
······································	/			
	/-			

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	eroved 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)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated 06/27/20	014	
Signature	that B	
selecté	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 ted fiduciary by that fiduciary)	
	AUGUSTO CESAR PERALTA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	