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(A	ddress)			
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(C	ity/State/Zip/Phon	e #)		
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(Business Entity Name)				
(Document Number)				
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FLORIDA DEPARTMENT OF STATES OF THE DIVISION OF COrporations

August 22, 2013

JOEL A. VICENTE PET'S PARADISE INC 3120 NW 4TH ST MIAMI, FL 33125

SUBJECT: PET'S PARADISE, INC Ref. Number: P09000037055

We have received your document for PET'S PARADISE, INC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

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) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 613A00020027



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 22, 2013

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Letter Number: 613A00020027

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: PET'S PAR	RADISE INC			
DOCUMENT NUMBER: P09000037055					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this matter to the following:					
	JOEL A. VICENTE				
		Name of Contact Persor	1		
		Firm/ Company			
	3120 NW 4TH ST				
	Address				
	MIAMI, FL 33125				
		City/ State and Zip Code	2		
edu	iardo@g-m-accoເ	ınting.com			
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	n concerning this matter, pleas	e call:			
Mario E. Mansito		_{at (} 305	485-1042		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department 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 to Articles of Incorporation of

FILED

PET'S PARADISE INC

18 SEP -6 ARII: 23

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

SECRETARY OF STATES LALLAHASSEE, FLORIDA

P09000037055

nt(s) to

The new pany," or "incorporated" or the abbreviation
pany," or "incorporated" or the abbreviation
pany," or "incorporated" or the abbreviation
professional corporation name must contain the
0 NW 4TH ST
MI, FL 33125
orida, enter the name of the
<u> </u>
, Florida 33125 (Zip Code)
(Zip Code)

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	•
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PD	JOEL A. VICENTE	3120 NW 4TH ST
X_Add			MIAMI, FL 33125
Remove			
2) Change	PD	CARLOS B HERNANDEZ	251 NW 39TH AVE
Add			MIAMI, FL 33126
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			-
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The date of each amendment		, if other than the
date this document was signed. Effective date <u>if applicable</u> :	07/13/13	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement and 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)	
-	(voting group)	
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated		
Signature	Roof Miles	
₹3.00 <u>(B</u>	a director, president or other officer – if directors or officers have not been	
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
ад	ppointed fiduciary by that fiduciary)	
	Y Joel Angel Vicente	
	(Typed or printed name of person signing)	<u> </u>
	\$7	
	* Yresident/Owner	
	(Title of person signing)	