Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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(((H14000132433 3)))



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To:

Division of Corpoxations

Fax Number

1 (850)617-6380

From:

: ACCOUNTANT & MANAGEMENT INC Account Name

Account Number : 120110000070 Phone

: (305)541-3980

Fax Number

(305)541-7033

**Enter the small address for this business entity to be used for future annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN J.R. PLATINO, INC.

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Corporate Filing Menu

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6/6/2014 2:58 PM

Pg 13/29 06/06/14 5:42 pm

H14000132433 3

COVER LETTER

		•		
TO: Amendment Social Division of Corpo				
NAME OF CORPOR	ATION: J.R. PLATI	NO, INC		
DOCUMENT NUMB	BERI P0900009183	8		
The enclosed Articles	of Amendment and tes are su	omined for filing.	•	
Please return all corres	pondence concerning this mat	ter to the following:		
	MOSES NAE			
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person		
	ACCOUNTANT 8	MANAGEMEN	TINC	
		Firm/ Company		
	1549 NE 123RD	ST		
		Address		
	NORTH MIAMI, F	L 33161		
		City/ State and Zip Cod	a	
INF	O@TAXLEAF.CO	DM .		
1144		ed for future annual report	notitiontion)	
	·	_		
For further information	n concerning this matter, pleas	e call:		
MOSES NAE		305	541-3980 de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	ertment of State:	
■ \$35 Piling Fee	Certificate of Status	☐\$43.75 Piling Pee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Foc Certificate of Status Certified Copy (Additional Copy is enclosed)	
	iling Address		Address	
	endment Section Islan of Corporations	Amendment Section Division of Corporations		
	Box 6327		Building	
Tall	ahmano, FL 32314	- -	keoutive Center Circle assec, FL 32301	
		1 411146	#84881 マケンシャベイミ	

To: 350-617-6383

From: moses nae

Pg 14/29 06/06/14 5:42 pm

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Articles of Ame	mdinens 2014 JU	ATE STATE
Articles of Incor	oporation STALLA	THASSEE, FLORIDA
J.R. PLATINO, INC.	- 19	· ·
(Name of Corporation as currently filed with the Flo. P09000091838	rida Dept. of State)	
(Decement Number of Corporation (if k	mown)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:	lorida Profit Corporation edopts the fol	ilowing amendment(s) to
A. If amending name, enter the paw name of the corporations	•	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co word "chartered," "professional association," or the abbreviation "P. B. Enter new principal office address, if applicable: (Principal office address MIST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	o". A professional corporation name.A."	must contain the
D. If amending the registered agent and/or registered office address: new resistanced agent and/or the new resistered office address:	m in Fiorida, enter the name of the	
Name of New Revistared Avent		
(Florida stres	st address)	·
New Registered Office Address:	Plorida	
(Chy)	(Zip Co	· .

Page 1 of 4

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.

Signature of New Registered Agent, if changing

Remove

From: moses nae

H14000132433 3

address of each Officer as (Attach additional sheets, i) Please note the officer/direct P = President; V= Vice President; CFO = held. President, Treasurer, Changes should be noted it a change, Mike Jones leave Mike Jones, V as Remove, i	id/or Di I necessi- ctor title resident; Chief F Director the folions the folions	rector he Ny) : by the fil : T= Tred Inancial (r would b lawing ma proration	ing added: strer; S= Secretary; D= Director; TR= Tr Officer. If an officer/director holds more th e PTD. anner. Currently Jahn Doe is listed as the P. a. Sally Smith is named the V and S. These si	trector being removed and title, name, and ustee; C = Chairman or Clerk; CEO = Chief on one title, list the first letter of each office ST and Mike Jones is listed as the Y. There is tould be noted as John Doe, PT as a Change,
Example: X Change	et	John Do	1	
X Remove	¥	Mike lo	aes	
_X Add	SY	Sally Sm	ith	
Type of Action (Check One)	Title		Name	Address
1) Change	VP	_	ROSADO, DAMARIS	14010 SW 58TH MANOR
Add		•		DAVIE, FL 33330
Remove				
2) Change		-		
Remove 2) Change		_		
Add Remove				
4) Change		<u>.</u>		
Remove				
5) Change		-		
Remove				
6) Change		_		

H14000132433 3

If a manding or adding additional Articles, enter change(s) harn: (Attach additional sheets, if necessary). (He specific)						
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		 	<u>-</u>			
		<u></u>		<u></u>		
				<u></u>		
						
ifa pr	g smendment provide ovisions for implement (if not applicable, Inc	es for an exchange, nting the amendme dicute N/A)	reclassification at if not contain	or cancellution of ed in the amenda	Lisued shares. ent itself:	
			·			
		<u> </u>				
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From: moses nae

H14000132433 3

The date of each amendment(s) ad	option:	, if other than th
date this document was signed.		
Effective date if applicable:	(110 more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amondment(s) was/were adopy the shareholders was/were and	pted by the shareholders. The number of votes cast for the amendment(s) filcient for approval.	
The amendment(s) was/were app musi be separately provided for	royed by the shareholders through voting groups. The following statement each roting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
Ъу	**	
	(voting group)	
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
The stoendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated 06/03/20	314	
	7 0 1	
Signature	han Stone	
	rector, 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 med fiduciary by that fiduciary)	
	JUAN ROSADO	
	(Typed or printed name of person signing)	
	PRESIDENT .	
	(Title of person signing)	7