

P0900102252

Florida Department of State of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000229914 3)))



H180002299143ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations Fax Number : (850)617-6388

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I2000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

FILED 18 AUG -7 AM 11:06

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

Email Address: _____

S TALLENT AUG 08 2018

COR AMND/RESTATE/CORRECT OR O/D RESIGN K & Y KARINA'S DOG GROOMING AND BOARDING CORP.

2018 AUG -7 PM 3:43

Table with 2 columns: Item, Value. Rows: Certificate of Status (0), Certified Copy (0), Page Count (05), Estimated Charge (\$35.00)

Handwritten signature

Articles of Amendment
to
Articles of Incorporation
of

K & Y KARINA'S DOG GROOMING AND BOARDING CORP.

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

P09000102252

(Document Number of Corporation (if known))

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:

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**)*

C. Enter new mailing address, if applicable:
*(Mailing address **MAY BE A POST OFFICE BOX**)*


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 ALAIN AREVALO
532 SE 47 TERR UNIT 5
(Florida street address)

New Registered Office Address: CAPE CORAL, Florida 33904
(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.



Signature of New Registered Agent, if changing

18 AUG - 7 AM 11:04

FILED

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____ (no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 8/6/18

Signature *Maria Teresa Gonzalez*

(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)

MARIA TERESA GONZALEZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)