# P10000006264

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(Address)
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INVISION OF CORPORATIONS

10 DEC 27 PH 12: 5.

Aniend C.COULLIETTE

DEC 29 2010

**EXAMINER** 

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P1000006264  Indicate the following:  HENRY PHILLIPS  Name of Contact Person  HENRY & ASSOCIATES  Firm/ Company
HENRY PHILLIPS Name of Contact Person  HENRY & ASSOCIATES
HENRY PHILLIPS Name of Contact Person HENRY & ASSOCIATES
Name of Contact Person  HENRY & ASSOCIATES
HENRY & ASSOCIATES
Firm/ Company
300 A GLOUCESTER STREET
Address
BRUNSWICK, GA 31520
City/ State and Zip Code
/-PHILLIPS@COMCAST.NET to be used for future annual report notification)
matter, please call:
at (912)264-4848
Area Code & Daytime Telephone Number
nount made payable to the Florida Department of State:
& S43.75 Filing Fee & S52.50 Filing Fee us Certified Copy Certificate of Status (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)
Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment Articles of Incorporation**

### RAMBROS DISTRIBUTION, INC

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



P1000006264	
(Document Number of Corporat	ion (if known)
Pursuant to the provisions of section 607.1006, Florida Statumendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>n:</u>
	The new
name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associ	orp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable:	11153 BEACH BLVD
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	JACKSONVILLE, FL
	32246
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	11153 BEACH BLVD
	JACKSONVILLE, FL 32246
D. If amending the registered agent and/or registered office	
new registered agent and/or the new registered office ad	uress:
Name of New Registered Agent:	
New Registered Office Address: (Flor	ida street address)
	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam	
Sionature 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) Address **Type of Action Title Name** VΡ KHALID Y. HAMAD 1089 HURON STREET ☑ Remove JACKSONVILLE, FL 32225 ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

F.	an amendment provides for an exchange, reclassification, or cancellation of issued shares, rovisions for implementing the amendment if not contained in the amendment itself; (if not applicable, indicate N/A)		

The date of each amendmen	t(s) adoption: OCTOBER 31, 2010
Effective date if applicable:	(date of adoption is required)  NOVEMBER 1,2010
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
Dated_OC	TOBER 31, 2010
(By sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	MOHAMMED JAMHOUR
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)