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SECRETARY OF STATE OF STATE OF CORPORATIONS

Amund, 10

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: JATI FURNITURE CORP		RP	
DOCUMENT NUM	BER:	P10000012054		
The enclosed Article	s of Amendment and fee a	are submitted for filing.		
Please return all corr	espondence concerning th	is matter to the following:		
_		ian F. Montero, Esq.		
	Ŋ	lame of Contact Person	•	
· .		ontero Wolkov LLP		
		Firm/ Company	·	
	1441 Br	ickell Avenue, 15th Floor	· · · · · · · · · · · · · · · · · · ·	
•		Address		
	М	ami, Florida 33131		
		ity/ State and Zip Code		
· · <u></u>	jmontero@ E-mail address: (to be use	monterowolkov.com d for future annual report notification)		
For further information	on concerning this matter,	please call:		
	F. Montero, Esq.	at (305) 4	07-1771	
Name of	Contact Person	Area Code & Daytime Tel	ephone Number	
Enclosed is a check f	or the following amount n	nade payable to the Florida Depart	iment of State:	
☑ \$35 Filing Fec	\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Add Amendment S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl	e	
		Tallahassee, FL 32301		



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 22, 2010

JULIAN F. MONTERO, ESQ. MONTERO WOLKOV LLP 1441 BRICKELL AVENUE - 15TH FLOOR MIAMI, FL 33131

SUBJECT: JATI FURNITURE CORP

Ref. Number: P10000012054

We have received your document for JATI FURNITURE CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

PHOTO COPIES OF SIGNATURES ARE NOT ACCEPTABLE.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 010A00027315

Articles of Amendment to Articles of Incorporation of

JATI FURNITURE CORP

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

P [.]	10000012054		·
(Document N	lumber of Corporat	ion (if known)	
Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporation		tes, this <i>Florida Profit</i>	Corporation adopts the follow
A. If amending name, enter the new name	e of the corporatio	<u>.</u>	_
name must be distinguishable and contai abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "	the designation "C	orp," "Inc," or "Co".	A professional corporation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		512 Central Park I	Or.
		Sanford, FL 32771	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		512 Central Park D	<u> </u>
	•	Sanford, FL 32771	
D. If amending the registered agent and/o new registered agent and/or the new re			ter the name of the
Name of New Registered Agent:	Julian F. Mo	ntero, Esq.	_
	1441 Brickel	l Avenue, 15th Floor	
New Registered Office Address:	(Flor	ida street address)	
.*	Miami (City)) (Zi	, Florida_33131 ip Code)
New Registered Agent's Signature, if char I hereby accept the appointment as registere	nging Registered A ed agent. I am fam	Agent: iliar with and accept the	obligations of the position.
	Signature of New	Registered Agent, if ch	anging

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
		**************************************	Add Remove
	<u> </u>		
	•		
E. If amend (attach ad	ling or adding additional Articled ditional sheets, if necessary).	es, enter change(s) here: (Be specific)	
)
A-10-0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			
<u>provisio</u>	nendment provides for an exchange of a policable, indicate N/A)	inge, reclassification, or cancella liment if not contained in the am	ation of issued shares, endment itself;
		· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·		

The date of each amendmen	nt(s) adoption: <u>11/02/2010</u>
	(date of adoption is required)
Effective date <u>if applicable</u> :	(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) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	99
	(voting group)
action was not required.	rere adopted by the board of directors without shareholder action and shareholder action by the incorporators without shareholder action and shareholder
action was not required.	
Dated 11/	02/2010
se	by a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Estuardo Lowenthal
	(Typed or printed name of person signing)
	Director
•	(Title of person signing)