

P/0000028297

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

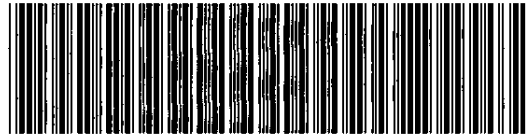
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100185335121

09/15/10--01016--010 **70.00

FILED

2010 SEP 15 A 11:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*Amend
Thurs
9-17-10*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CARIBE UPHOLSTERY & SUPPLY INC

DOCUMENT NUMBER: P10000028297

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ORESTE PINO

(Name of Contact Person)

CARIBE UPHOLSTERY & SUPPLY INC

(Firm/ Company)

2210 NW 14 STREET SUITE # 8

(Address)

MIAMI FLORIDA 33125

(City/ State and Zip Code)

edelcas624@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

oreste pino

(Name of Contact Person)

at (786) 715-8714

(Area Code & 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

FILED

Articles of Amendment
to
Articles of Incorporation
of

2010 SEP 15 A 11: 28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CARIBE UPHOLSTERY & SUPPLY INC.

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

P10000028297

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or " Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

N/A

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

N/A

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:

JUAN ENRIQUE TORRES

2210 NW 14 STREET SUITE # 8

New Registered Office Address:

(Florida street address)

MIAMI

(City)

Florida 33125

(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

(Attach additional sheets, if necessary)

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

ARTICLE IV. ADD 100 SHARES TO JUAN ENRIQUE TORRES

The date of each amendment(s) adoption: AUGUST 20, 2010

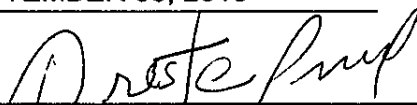
Effective date if applicable: AUGUST 20, 2010
(date of adoption is required)
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated SEPTEMBER 08, 2010

Signature



(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)

ORESTE PINO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)