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FILED SECRETARY OF STATE TALLAMASSES. FLORIDA

OCT - 4 2013 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations

	ATION: A and I M		CES INC.		
DOCUMENT NUMBI	ER: P10000036	133	· · · · · · · · · · · · · · · · · · ·		
The enclosed Articles of	f Amendment and fcc are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
F	FRANCOIS LO	OUIS A.			
_		Name of Contact Persor	1		
	A and I MULTI	SERVICES II	NC.		
		Firm/ Company			
Į.	PO BOX 77259	91			
_		Address			
(CORAL SPRIN	IGS, FL 3307	7		
•		City/ State and Zip Code			
fran	icola us@yah	oo com			
E-mail address: (to be used for future annual report notification)					
		•	,		
For further information	concerning this matter, pleas	se call:			
FRANCOIS		751	245 0452		
		at (134	245-0153 de & Daytime Telephone Number		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment 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)		
	ng Address	Street	Address		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations			
Tallahassee, FL 32314			Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation

13 SEP 25 AH 11: 50

A AND I MULTI SERVICES INC (Name of Corporation as currently filed with the Florida Dept. of State) P10000036133 (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: 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." 801 SW 49th TERRACE B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) MARGATE, FL 33068 C. Enter new mailing address, if applicable: PO BOX 772591 (Mailing address MAY BE A POST OFFICE BOX) CORAL SPRINGS.FL 33077 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 (Florida street address) New Registered Office Address: . Florida (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

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)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	V	VICTOR IRENE	3591 N. ANDREWS AVENUE UNIT C
Add			OAKLAND PARK,FL 33309
X Remove			
			
2) Change			
Add			
Remove			
3) Change			NA94
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sh	ing additional Art eets, if necessary).		<u> </u>		
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If an amendment popovisions for imp	rovides for an exc lementing the am tole, indicate N/A)	hange, reclassific endment if not co	ation, or cancella ntained in the am	tion of issued shar endment itself:	<u>res.</u>

The date of each amendment(s) adoption: date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date)	, if other than the
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)	
(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 09/22/2013	
FRANCOIS LOUIS A.	
(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)	
FRANCOIS LOUIS A.	
(Typed or printed name of person signing)	···
PRESIDENT	

(Title of person signing)