P10000038693

(Requ	estor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/s	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Nar	me)
. (Docu	ıment Number)	
Certified Copies	Certificate	s of Status
Special Instructions to Fil	ling Officer:	

Office Use Only



400235968404

06/11/12--01010--023 **35.00

Amend



JUN 1 2 2012

T. ROBERTS

COVER LETTER

Division of Corpor	ations		
NAME OF CORPORA	ATION: QUIN	Teno's sups	Hine Services C
DOCUMENT NUMBER:			
The enclosed Articles of	f Amendment and fee are	submitted for filing.	
Please return all corresp	ondence concerning this	matter to the following:	
	64	zum Qunt	Senvices Conp
		Name of Contact Perso	on .
	Quatons	15 SUNSILIMO	Santiages Cons
	GOINTER	Firm/Company	serwices with
	1-960 B	1/0-1/04 0	
<u></u>	0100 12	De Um Bom 12	
	4.6.	Address	. 33/41
-	MIA	ni iseach, fc	. 33/41
		City/ State and Zip Coc	16
	E mail address: (to be	e used for future annual repor	t notification)
	L-man address. (to be	ased for future annual repor	t notification)
For further information of	concerning this matter, pl	ease call:	
GERMI	an Quenter	o at (786	ode & Daytime Telephone Number
Name of	Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for t	he following amount ma	de payable to the Florida Dep	artment of State:
	-		
■ \$35 Filing Fee	□\$43.75 Filing Fee &		□\$52.50 Filing Fee
	Certificate of Status	Certified Copy (Additional copy is	Certificate of Status Certified Copy
		enclosed)	(Additional Copy
		,	is enclosed)
Mailir	ng Address	Street	Address
	dment Section		dment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

(Name of Corporation as curren			20145	
	0038693	,		
	per of Corporation (if know	/n)		
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this <i>Florid</i>	a Profit Corporation ado	ppts the following an	nendment(s) to
A. If amending name, enter the new name of t	the corporation:			ر.
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered." "professional association," o B. Enter new principal office address, if applic (Principal office address MUST BE A STREET) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or renew registered agent and/or the new registered agent and/or the new registered agent.	Corp," "Inc," or "Co". or the abbreviation "P.A." cable: ADDRESS) EBOX gistered office address in	A professional corporati	ated" or the abbu	
Name of New Registered Agent				
	(Florida street add	ress) .		
New Registered Office Address:	(City)	, Florida	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag		nd 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> <u>Johr</u>	<u>n Doe</u>	,
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1)Change Add Remove	VP	SONIA QUINTERO	6960 Rue Vendone Mirmi Beach, PC. 33141
2) Change Add Remove	Sec.	TATIANA QUINTERO	6960 Rue Ukudome Miami Beach, R.33141
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

	adding additional Arti al sheets, if necessary).	(Be specific)			
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If an amendmen provisions for i (if not appl	nt provides for an exch mplementing the amer icable, indicate N/A)	ange, reclassifica ndment if not con	tion, or cancellat tained in the ame	ion of issued share indment itself:	<u>S.</u>
NA					w
	+				
	<u>+</u>				
	t				

The date of each amendment(s) adoption:	06-05-12		
ffective date if applicable: 06-05-12			
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s) ((CHECK ONE)		
The amendment(s) was/were adopted by by the shareholders was/were sufficient to	the shareholders. The number of votes cast for the amendment(s) for approval.		
	y the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):		
"The number of votes cast for the a	mendment(s) was/were sufficient for approval		
by	(voting group)		
	(voting group)		
☐ The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder		
☐. The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder		
Dated 06-05	5-12		
Signature			
(By a director, p selected, by an	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court iary by that (iduciary)		
	GERMAN QUITERO		
•	(Typed or printed name of person signing) President		
—— <i>I</i>	(Title of person signing)		